Blue Shield TotalDual Plan (HMO D-SNP)

2024 年服務提供者目錄

縣：San Diego
Blue Shield TotalDual Plan | 2024 年提供者名錄

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

目錄

A. 免責聲明 .................................................................................................................................5
B. Blue Shield TotalDual Plan 網絡內服務提供者背景資訊 .........................................................6
   B1. 關鍵術語 ...........................................................................................................................6
   B2. 初級保健和行為健康的等待時間 .......................................................................................7
   B3. 如何選擇主治醫師 (PCP) ..............................................................................................8
   B4. 長期服務與支援 (LTSS) 服務提供者 .............................................................................8
   B5. 如何從 Blue Shield TotalDual Plan 網絡內提供者處獲取服務 ...........................................9
C. Blue Shield TotalDual Plan 網絡內提供者清單 .....................................................................10
   C1. 網絡內提供者清單 ...........................................................................................................11
   C3. 專業護理機構 (SNF) ......................................................................................................778
D. Blue Shield Promise Medi-Cal 網絡內提供者清單 ..............................................................783
   D1. 具備聯邦資質的健康診所 ..............................................................................................783
   D2. 初級保健名錄 ..................................................................................................................1001
   D3. 專業提供者目錄 .............................................................................................................1602
   D4. 醫院名錄 - 普通急症醫院 ...............................................................................................2234
   D5. 長期服務與支援 (LTSS) 服務提供者 .............................................................................2239
      I. 長期護理 (LTC) 和熟練護理機構 (SNF) ............................................................................2239
      II. 縣居家支援服務 (IHSS) ..................................................................................................2255
      III. 基於社群的成人服務 (CBAS) - 成人日間服務 ...........................................................2256
   D6. 心理健康名錄 ..................................................................................................................2259
   D7. 視力提供者目錄 - 眼科和視力服務 .................................................................................2330
   D8. 其他服務提供者 ...............................................................................................................2427
   D9. Blue Shield Promise 緊急護理設施 .................................................................................2428
E. 服務提供者索引 ...................................................................................................................2453
同时注册了 Medi-Cal 的 DSNP 提供者
如有问题，请致电 Blue Shield TotalDual Plan，电话：1-800-452-4413 (TTY: 711)，服务时间：每週七天，每天早上 8 点至晚上 8 点。此为免费电话。如欲了解更多资讯，请造访 www.blueshieldca.com/medicare
A. 免責聲明

- 本名錄列出了醫療保健專業人員（如醫生、執業護士和心理學家）和機構（如醫院或診所）。本名錄也列出您作為 Blue Shield TotalDual Plan 會員可使用的長期服務與支援 (LTSS) 提供者（例如成人日間護理和家庭健康提供者）。我們亦列出了您可用於獲取處方藥的藥房。

- 於本名錄中，這些群體被稱為「網絡內提供者」。該等提供者與我們簽訂了合約以向您提供服務。這是 Blue Shield TotalDual Plan 面向 San Diego 縣提供服務的網絡內提供者清單。

- 您可免費索取本文件的其他格式，例如：大字版、盲文版或音訊版。請致電 1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天早上 8 點至晚上 8 點。此為免費電話。

- 我們提供免費口譯服務，回答您有關我們的健康或藥物計劃的任何問題。如須請求口譯員協助，只需致電 1-800-452-4413。會說英語、西班牙語、阿拉伯語、波斯語、亞美尼亞語、高棉語、韓語、俄語、他加祿語或越南語的人員可以為您提供幫助。這是一項免費服務。您可提出標準申請，以於現在或未來獲得英語之外的其他語言或其他格式的文件。如欲提出申請，請聯絡 Blue Shield TotalDual Plan 客戶關懷部，其將記錄您的偏好語言和格式，以供未來進行溝通。如欲更新偏好，請聯絡 Blue Shield TotalDual Plan。

- 此清單為截至 05/03/2024 日的最新版本，但您需知悉：
  - 此名錄出版後，Blue Shield TotalDual Plan 的某些網絡內提供者可能已納入或移出我們的網絡。
  - Blue Shield TotalDual Plan 的某些網絡內提供者可能不再接受新會員。如果您在尋找接受新會員的提供者時遇到困難，請致電客戶關懷部，電話：1-800-452-4413 (TTY: 711)，我們將為您提供幫助。
  - 如欲獲取有關所在區域 Blue Shield TotalDual Plan 網絡內提供者的最新資訊，請造訪 www.blueshieldca.com/medicare，或致電客戶關懷部，電話：1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天早上 8 點至晚上 8 點。此為免費電話。

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

您可使用目錄背面的索引來查找列明服務提供者或藥房的頁面。
B. Blue Shield TotalDual Plan 網絡內服務提供者背景資訊

B1. 關鍵術語

本節就目錄中的關鍵術語作出說明。

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

†同時註冊了 Medi-Cal 的 DSNP 提供者
如有問題，請致電 Blue Shield TotalDual Plan，電話：1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天早上 8 點至晚上 8 點。此為免費電話。如欲瞭解更多資訊，請造訪 www.blueshieldca.com/medicare
- Medicare 承保的所有預防性服務，包括篩檢和疫苗。

  o 此外，如果您符合資格獲得印第安健康提供者提供的服務，您可在此等提供者處就診，無需轉介。我們須為該等服務向印第安健康提供者付款，即便其不在我們計劃的網絡內。

  o 更多關於轉介和事先授權的資訊可查閱《承保範圍說明書》第 3 章。

- 您也將被指派一個護理團隊。護理團隊從您與 PCP 的關係開始，為您提供服務。根據您護理計劃中所述的需求等級，護理團隊可能包括照護者、護理指導員、專科醫生和其他人員。護理團隊中的每位成員將通力合作，確保您的護理得到妥善協調。這表示他們確保您接受所需的所有測試、化驗及其他護理，並與相關提供者共享結果。這表示您的 PCP 應知道您使用的所有藥物，以便幫助您減少任何副作用。在與其他提供者分享您的醫療資訊之前，PCP 始終會先徵求您的同意。護理團隊成員可能包括：

  o 護理指導員，可幫助您管理您的醫療提供者及服務。

  o 您的主治醫師

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

B2. 初級保健和行為健康的等待時間

我們必須在以下時間範圍內為您提供初級保健和行為健康服務：

  - 立即提供緊急服務或緊急情況；

  - 7 天內，適用於非緊急或緊急需要、但您需要醫療護理的服務；

  - 30 天內，適用於常規或預防性護理。

B3. 如何選擇主治醫生 (PCP)

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

我們計劃的 PCP 隸屬於醫療團體。當您選擇 PCP 時，您也選擇了其所屬的醫療團體。這意味著，您的 PCP 會將您轉介至同一醫療團體的專科醫生和服務提供者。

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

  - 如果您離開 PCP 所在的醫療團體，Blue Shield TotalDual Plan 可能不會承保該服務。

若要選擇 PCP，請參閱第 13-2452 頁上的醫生列表並選擇一位醫生：

  - 您目前使用的醫生，或

  - 您信任的人士推薦的醫生，或
您方便前往其診室的醫生。

如果您未在網絡內選擇一個PCP，Blue Shield TotalDual Plan將會為您做出選擇。

如果您想幫助更換PCP，請致電客戶關懷部，電話：1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天上午8點至晚上8點。此為免費電話。或者造訪www.blueshieldca.com/medicare

如果您對我們是否承保您想要或需要的任何服務或護理有任何疑問，與您的護理團隊探討或致電客戶關懷部，電話：1-800-452-4413 (TTY: 711)並在接受該服務或護理之前來電諮詢。

B4. 長期服務與支援 (LTSS) 服務提供者

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

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

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

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

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

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

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

請記住，我們計劃的PCP隸屬於醫療團體。如果您更換PCP，可能也變更了醫療團體。在您申請更換時，請務必告知客戶關懷部您是否在向專科醫生求診，或是否在接受其他需要PCP批准的承保服務。當您更換PCP時，客戶關懷部將會協助確保您可繼續獲得專科醫生的護理或其他服務。

†同時註冊了Medi-Cal的DSNP提供者

如有問題，請致電Blue Shield TotalDual Plan，電話：1-800-452-4413 (TTY: 711)，服務時間：每週七天，每天早上8點至晚上8點。此為免費電話。如欲瞭解更多資訊，請造訪www.blueshieldca.com/medicare
Blue Shield TotalDual Plan 會與網絡內所有提供者合作，幫助滿足殘障人士的各種需求。本目錄所載網絡內提供者清單包含所提供者的便利設施的資訊（如適用）。

若您需要前去某個提供者處就診，但不確定他們能否提供您所需的便利設施，Blue Shield TotalDual Plan 可以幫助您。請諮詢您的護理指導員，以獲取協助。

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

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

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

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

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

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

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

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

PCP 總數: 2754

專科醫生總數: 2858

醫院總數: 20

針灸和脊椎按摩師總數: 服務提供者: No Data

牙科服務提供者總數: No Data

居家健康服務提供者總數: 1

精神健康服務提供者總數: 351

視力服務提供者總數: 445

長期服務與支援提供者總數: No Data

精神健康機構總數: No Data

專業護理機構總數: 84

其他服務提供者: 1
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<th>Hospital Name</th>
<th>Effective Date</th>
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<th>City, State Code</th>
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<td>ALVARADO HOSPITAL LLC</td>
<td>01-AUG-12</td>
<td>6655 ALVARADO RD</td>
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<td>35470 WHITEWOOD RD</td>
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<td>01-JAN-20</td>
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<td>HOAG HOSPITAL IRVINE</td>
<td>01-FEB-14</td>
<td>16200 SAND CANYON AVE</td>
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<td>HOAG ORTHOPEDIC INSTITUTE</td>
<td>01-JAN-12</td>
<td>16250 SAND CANYON AVE</td>
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<td>KINDRED HOSPITAL SAN DIEGO</td>
<td>01-JAN-12</td>
<td>1940 EL CAJON BLVD</td>
<td>SAN DIEGO, CA 92104</td>
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<td>MENIFEE GLOBAL MEDICAL CENTER</td>
<td>01-JAN-20</td>
<td>28400 MCCALL BLVD</td>
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<td>MISSION HOSPITAL LAGUNA BEACH</td>
<td>01-JAN-10</td>
<td>31872 COAST HWY</td>
<td>LAGUNA BEACH, CA 92651</td>
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<td>PALOMAR HEALTH</td>
<td>01-JAN-12</td>
<td>15615 POMERADO RD</td>
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<td>2185 CITRACADO PKWY</td>
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<td>01-AUG-12</td>
<td>2400 E 4TH ST</td>
<td>NATIONAL CITY, CA 91950</td>
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<td>PROVIDENCE MISSION HOSPITAL</td>
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<td>24451 HEALTH CENTER DR</td>
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<tr>
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<td>01-JAN-12</td>
<td>10666 N TORREY PINES RD</td>
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<td>354 SANTA FE DR</td>
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<td>SCRIPPS MERCY HOSPITAL</td>
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<td>4077 5TH AVE</td>
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<td>01-JAN-12</td>
<td>555 WASHINGTON ST</td>
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<td>TRI CITY MEDICAL CTR</td>
<td>01-JAN-12</td>
<td>4002 VISTA WAY</td>
<td>OCEANSIDE, CA 92056</td>
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</table>

您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。

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C1. 網絡內提供者清單

附屬醫院

**UCSD LA JOLLA JOHN SALLY THORNTON**  
Effective as of 01-OCT-14  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

**UCSD MEDICAL CTR**  
Effective as of 01-OCT-14  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Birthing Friendly: Y
<p>| | | | |</p>
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<tr>
<td>C1. 網絡內提供者清單</td>
<td>緊急護理中心</td>
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<td>本計劃承保網絡內與網絡外的急需服務。如欲網絡內緊急照護中心的最新</td>
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<td>清單，請聯絡您的醫療團體。</td>
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<tr>
<td>ACCELERATED URGENT CARE</td>
<td>28110 CLINTON KEITH RD</td>
<td>MURRIETA, CA 92563</td>
<td>(951) 436-0777</td>
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<td>SU-SA 8:00AM-9:00PM</td>
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<td>ACCELERATED URGENT CARE</td>
<td>29400 RANCHO CALIFORNIA RD</td>
<td>TEMECULA, CA 92591</td>
<td>(951) 595-8282</td>
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<td>ACCELERATED URGENT CARE</td>
<td>41540 WINCHESTER RD</td>
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<td>(951) 365-5585</td>
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<td>ACCELERATED URGENT CARE</td>
<td>36290 HIDDEN SPRINGS RD</td>
<td>WILDOMAR, CA 92595</td>
<td>(951) 483-2020</td>
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<td>ANAHEIM URGENT CARE INC</td>
<td>22855 LAKE FOREST DR</td>
<td>LAKE FOREST, CA 92630</td>
<td>(949) 676-9991</td>
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<tr>
<td>BAHIA FAMILY MEDICAL GROUP INC</td>
<td>584 E ST</td>
<td>CHULA VISTA, CA 91910</td>
<td>(619) 420-1378</td>
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<td>CONCENTRA URGENT CARE</td>
<td>5810 EL CAMINO REALSTE</td>
<td>CARLSBAD, CA 92008</td>
<td>(866) 944-6046</td>
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<td>CONCENTRA URGENT CARE</td>
<td>542 BROADWAY STE G</td>
<td>CHULA VISTA, CA 91910</td>
<td>(866) 944-6046</td>
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<td>CONCENTRA URGENT CARE</td>
<td>860 W VALLEY PKWY STE 150</td>
<td>ESCONDIDO, CA 92025</td>
<td>(760) 740-0707</td>
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<td>CONCENTRA URGENT CARE</td>
<td>15751 ROCKFIELD BLVD</td>
<td>IRVINE, CA 92618</td>
<td>(866) 944-6046</td>
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<td>CONCENTRA URGENT CARE</td>
<td>7862 EL CAJON BLVD</td>
<td>LA MESA, CA 91942</td>
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<td>LAKE FOREST, CA 92630</td>
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<td>MURRIETA, CA 92562</td>
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<td>CONCENTRA URGENT CARE</td>
<td>102 MILE OF CARS WAY</td>
<td>NATIONAL CITY, CA 91950</td>
<td>(866) 944-6046</td>
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<td>3910 VISTA WAY STE 106</td>
<td>OCEANSIDE, CA 92056</td>
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<tr>
<td>CONCENTRA URGENT CARE</td>
<td>5575 RUFFIN RD STE 100</td>
<td>SAN DIEGO, CA 92123</td>
<td>(858) 455-0044</td>
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<td>CONCENTRA URGENT CARE</td>
<td>7590 MIRAMAR RD STE C</td>
<td>SAN DIEGO, CA 92126</td>
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<td>CONCENTRA URGENT CARE</td>
<td>5333 MISSION CENTER RD STE 100</td>
<td>SAN DIEGO, CA 92108</td>
<td>(866) 944-6046</td>
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<td>(866) 944-6046</td>
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<tr>
<td>CONCENTRA URGENT CARE</td>
<td>3930 4TH AVE STE 200</td>
<td>SAN DIEGO, CA 92103</td>
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C1. 網絡內提供者清單

緊急護理中心

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<th>(866) 944-6046</th>
<th>M-F 8:00AM-5:00PM</th>
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<tr>
<td>CONCENTRA URGENT CARE</td>
<td>740 NORDAHL RD STE 130</td>
<td>SAN MARCOS, CA 92069</td>
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<tr>
<td>(760) 432-9000</td>
<td>(866) 944-6046</td>
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<td>OCEANSIDE INC</td>
<td>92056</td>
<td>OCEANSIDE, CA</td>
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<tr>
<td>(760) 216-6253</td>
<td>(949) 557-0600</td>
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<td>M-F 8:00AM-8:00PM</td>
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<tr>
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<td>1625 E MAIN ST STE 100</td>
<td>EL CAJON, CA 92021</td>
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<tr>
<td>(619) 442-9896</td>
<td>(949) 557-0000</td>
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<td>92656</td>
<td>ALISO VIEJO, CA 92656</td>
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<tr>
<td>(949) 791-3107</td>
<td>(949) 557-0730</td>
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<td>M-F 8:00AM-8:00PM</td>
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<td>INLAND URGENT CARE A MED CORP</td>
<td>27168 NEWPORT RD STE 1</td>
<td>MENIFEE, CA 92584</td>
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<tr>
<td>(951) 246-3033</td>
<td>(949) 760-9222</td>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

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C1. 網絡內提供者清單
緊急護理中心

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<thead>
<tr>
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<tr>
<td>27231 LA PAZ RD STE A</td>
<td>(949) 643-9111</td>
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<td>LAGUNA NIGUEL, CA 92677</td>
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<tr>
<td>MISSION HERITAGE MED GRP</td>
<td>(949) 276-2111</td>
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<tr>
<td>26800 CROWN VALLEY PKWY STE 150</td>
<td>SU 9:00AM-5:00PM</td>
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<tr>
<td>MISSION VIEJO, CA 92691</td>
<td>M-F 8:00AM-8:00PM</td>
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<tr>
<td>O C URGENT CARE MEDICAL</td>
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</tr>
<tr>
<td>GRP INC</td>
<td>(949) 297-3888</td>
</tr>
<tr>
<td>26781 PORTOLA PKWY STE 4E</td>
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<tr>
<td>FOOTHILL RANCH, CA 92610</td>
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<tr>
<td>OPTUM</td>
<td>(619) 591-9999</td>
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<tr>
<td>145 THUNDER DR</td>
<td>SU 10:00AM-6:00PM</td>
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<tr>
<td>VISTA, CA 92083</td>
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<td>RCH NORTH COUNTY URGENT</td>
<td>(619) 591-9999</td>
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<td>625 CITRACADO PKWY STE 100</td>
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<td>ESCONDIDO, CA 92025</td>
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<td>SAND CANYON URGENT CARE</td>
<td>(619) 591-9999</td>
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<td>IRVINE, CA 92618</td>
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<td>SOUTH COAST MEDICAL</td>
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<tr>
<td>5 JOURNEY STE 130</td>
<td>(949) 360-1069</td>
</tr>
<tr>
<td>ALISO VIEJO, CA 92656</td>
<td>SU 10:00AM-3:00PM</td>
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<tr>
<td>SOUTHBAY URGENT CARE INC</td>
<td>(760) 739-1543</td>
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<tr>
<td>1628 PALM AVE</td>
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C1. 網絡內提供者清單

初級保健提供者

**FAMILY PRACTICE**

**OCONNOR, SHANNON, MD**
Provider ID: 100027672003
5 JOURNEY STE 130
ALISO VIEJO, CA 92656
(949) 360-1069
Effective as of 01-JUL-12

**OCONNOR, SHANNON, MD**
Provider ID: 100027672005
5 JOURNEY STE 130
ALISO VIEJO, CA 92656
(949) 360-1069
Effective as of 01-JUL-12

**OCONNOR, SHANNON, MD**
Provider ID: 100027672006
5 JOURNEY STE 130
ALISO VIEJO, CA 92656
(949) 360-1069
Effective as of 01-OCT-07

**GENERAL PRACTICE**

**THOMAS, SEAN, MD**
Provider ID: 100112751013
15 MAREBLU STE 310
ALISO VIEJO, CA 92656
(949) 831-1001
French, Spanish
Effective as of 01-APR-16

**INTERNAL MEDICINE**

**HERMAN, SAM, MD**
Provider ID: 100414181004
26671 ALISO CREEK RD STE 206
ALISO VIEJO, CA 92656
(949) 791-3104
Effective as of 01-SEP-23

**KAYE, SHAWN, MD**
Provider ID: 100347353012

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**FQHC**

**SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,**
Provider ID: PG0094125003
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
(619) 662-4100
Teleservice
Effective as of 01-JAN-21

**FQHC**

**TRUECARE,**
Provider ID: PG0092587007
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
(760) 736-6767
Teleservice
Effective as of 01-JUL-22

**GENERAL PRACTICE**

**KREMER, ARNOLD, DO**
Provider ID: 100023664010
5814 VAN ALLEN WAY STE 215
CARLSBAD, CA 92008
(760) 444-5544
French
Teleservice
Effective as of 01-APR-19

**INTERNAL MEDICINE**

**CHONG, YOO JIN, MD**
Provider ID: 100055662004
5930 PRIESTLY DR
CARLSBAD, CA 92008
(760) 434-6060
Korean
Effective as of 01-NOV-21

**CHONG, MARIBETH, MD**
Provider ID: 100092861004
5930 PRIESTLY DR
CARLSBAD, CA 92008
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**Network Provider List**

*Initial Health Providers*

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**Family Practice**

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C1. 網絡內提供者清單
初級保健提供者

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

**ALJAWADI, GEORGIA, DO**†
Provider ID: 100133625008
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
- Filipino, Spanish, Tagalog
  Effective as of 01-JAN-14

**ALJAWADI, GEORGIA, DO**†
Provider ID: 100133625022
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
- Filipino, Spanish, Tagalog
  Effective as of 01-SEP-22

**ALJAWADI, GEORGIA, DO**†
Provider ID: 100133625005
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
- Filipino, Spanish, Tagalog
  Effective as of 01-NOV-12

**ALJAWADI, GEORGIA, DO**†
Provider ID: 100133625018
480 4TH AVE STE 202
CHULA VISTA, CA 91910
(619) 427-3361
- Filipino, Spanish, Tagalog
  Effective as of 01-JAN-21

**ALVAREZ-ESTRADA, MIGUEL, MD**†
Provider ID: 100360099015
1637 3RD AVE
CHULA VISTA, CA 91911
(619) 662-4100
- Spanish
  Effective as of 01-MAY-22

**ARCE GOMEZ, LAURA, MD**†
Provider ID: 100300002011
678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100
- Spanish, Tagalog
  Effective as of 01-APR-22

**ELSAYED, MOHAMMED, MD**†
Provider ID: 100020910028
330 OXFORD ST STE 106
CHULA VISTA, CA 91911
(619) 409-1802
- Arabic, German, Spanish
  Effective as of 01-APR-23

**ELSAYED, MOHAMMED, MD**†
Provider ID: 100020910031
330 OXFORD ST STE 106
CHULA VISTA, CA 91911
(619) 409-1802
- Arabic, German, Spanish
  Effective as of 01-AUG-20

**ELSAYED, MOHAMMED, MD**†
Provider ID: 100020910029
330 OXFORD ST STE 106
CHULA VISTA, CA 91911
(619) 409-1802
- Arabic, German, Spanish
  Effective as of 01-JAN-21

**ELSAYED, MOHAMMED, MD**†
Provider ID: 100020910030
330 OXFORD ST STE 106
CHULA VISTA, CA 91911
(619) 409-1802
- Arabic, German, Spanish
  Effective as of 01-JAN-21

**ELSAYED, MOHAMMED, MD**†
Provider ID: 100020910032
330 OXFORD ST STE 106
CHULA VISTA, CA 91911
(619) 409-1802
- Arabic, German, Spanish
  Effective as of 01-AUG-20

**FARRIS, REUBEN, MD**†
Provider ID: 100105788004
340 4TH AVE STE 2
CHULA VISTA, CA 91910
(619) 422-8338
- Spanish
  Effective as of 01-OCT-12

**GARCIA, KARLA, MD**†
Provider ID: 100269760002
678 3RD AVE
CHULA VISTA, CA 91910
(619) 662-4100
- Spanish
  Teleservice
  Effective as of 01-MAR-16

**HERNANDEZ, RALPH, MD**†
Provider ID: 100080408020
880 3RD AVE
CHULA VISTA, CA 91911
(619) 662-4100
- Spanish
  Teleservice
  Effective as of 01-MAR-16

**JIMENEZ, KRYSDEL, MD**†
Provider ID: 100080408020
880 3RD AVE
CHULA VISTA, CA 91911
(619) 662-4100
- Spanish
  Teleservice
  Effective as of 01-MAR-16
### C1. 網路內提供者清單
#### 初級保健提供者

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<td>MONDRAGON, GUSTAVO, MD</td>
<td>855 THIRD AVE STE 2230 CHULA VISTA, CA 91911</td>
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Your PCP's provider network may have its own network mental health service providers. Please refer to the list below. You may contact these providers directly. Please note, certain services may require mental health service providers to obtain Blue Shield prior authorization for the service to be covered.

For online access to mental health service provider list, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單
初級保健提供者

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<th>Name</th>
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FQHC

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<td>(619) 427-0665</td>
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</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
<table>
<thead>
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<th>Name</th>
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<td>450 4TH AVE STE 408 CHULA VISTA, CA</td>
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<td>754 MEDICAL CENTER CT STE 103 CHULA VISTA, CA</td>
<td>(619) 397-5001</td>
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<td>(619) 426-9731</td>
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初級保健提供者

- Spanish
- Teleservice
- Effective as of 01-JUN-21

OLIVER, DEANNA, MD
Provider ID: 100328564040
2436 FENTON ST STE 100-B
CHULA VISTA, CA 91914
(619) 264-1934
- Spanish
- Effective as of 01-NOV-23

OLIVER, DEANNA, MD
Provider ID: 100328564045
2436 FENTON ST STE 100-B
CHULA VISTA, CA 91914
(619) 264-1934
- Spanish
- Effective as of 01-MAR-24

OLIVER, DEANNA, MD
Provider ID: 100328564043
1323 3RD AVE
CHULA VISTA, CA 91911
(619) 409-6900
- Spanish
- Effective as of 01-SEP-21

OLIVER, DEANNA, MD
Provider ID: 100328564041
1323 3RD AVE
CHULA VISTA, CA 91911
(619) 409-6900
- Spanish
- Effective as of 01-NOV-23

OLIVER, DEANNA, MD
Provider ID: 100328564034
1323 3RD AVE
CHULA VISTA, CA 91911
(619) 409-6900
- Spanish
- Effective as of 01-JAN-18

PENA, JOSE, MD
Provider ID: 100104432025
333 H ST STE 1065
CHULA VISTA, CA 91910
(619) 691-1766
- Spanish
- Effective as of 01-SEP-22

PENA, JOSE, MD
Provider ID: 100104432024
333 H ST STE 1065
CHULA VISTA, CA 91910
(619) 691-1766
- Spanish
- Effective as of 01-FEB-23

PENA, JOSE, MD
Provider ID: 100104432022
333 H ST STE 1065
CHULA VISTA, CA 91910
(619) 691-1766
- Spanish
- Effective as of 01-JUL-21

PENA, JOSE, MD
Provider ID: 100104432023
333 H ST STE 1065
CHULA VISTA, CA 91910
(619) 691-1766
- Spanish
- Effective as of 01-MAY-21

PENA, JOSE, MD
Provider ID: 100104432013
340 4TH AVE STE 10
CHULA VISTA, CA 91910
(619) 934-2215
- Spanish
- Effective as of 01-DEC-17

PEDIATRICS
GARCIA, CARLOS, MD
Provider ID: 100067783008
1392 E PALOMAR ST STE 501
CHULA VISTA, CA 91913
(619) 271-4059
- Spanish
- Effective as of 01-JAN-14

INTERNAL MEDICINE
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**Network Providers: General Practice**

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**Network Providers: Internal Medicine**

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**Network Providers: Family Practice**

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**Notes:**
- Arabic, Farsi, Spanish
- Teleservice
- Effective as of specified date.
Effective as of 01-JAN-24
MOULD, KEVIN, MD
Provider ID: 100112431013
855 E MADISON AVE
EL CAJON, CA 92020
(619) 440-2751
Effective as of 01-JAN-24
MOULD, KEVIN, MD
Provider ID: 100112431012
855 E MADISON AVE
EL CAJON, CA 92020
(619) 440-2751
Effective as of 01-AUG-20
PUTRUS, RAMIZ, MD
Provider ID: 100348831004
183 S 1ST ST
EL CAJON, CA 92019
(619) 328-1335
Effective as of 01-JUL-21
RONQUILLO, KAREN AN, DO
Provider ID: 100421622002
855 E MADISON AVE
EL CAJON, CA 92020
(619) 440-2751
Effective as of 01-FEB-24
RONQUILLO, KAREN AN, DO
Provider ID: 100421622004
855 E MADISON AVE
EL CAJON, CA 92020
(619) 440-2751
Effective as of 01-APR-24
ROUEL, LINDA, MD
Provider ID: 100259719024
860 JAMACHA RD STE 107
EL CAJON, CA 92019
(619) 456-9920
Arabic, Mandarin, Syriac
Effective as of 01-AUG-21
ROUEL, LINDA, MD
Provider ID: 100259719007
860 JAMACHA RD STE 107
EL CAJON, CA 92019
(619) 456-9920
Arabic, Mandarin, Syriac
Effective as of 01-FEB-18
ROUEL, LINDA, MD
Provider ID: 100259719025
860 JAMACHA RD STE 107
EL CAJON, CA 92019
(619) 456-9920
Arabic, Mandarin, Syriac
Effective as of 01-SEP-22
SALEM, RAMSEY, MD
Provider ID: 100360207006
1032 BROADWAY
EL CAJON, CA 92021
(619) 795-5991
Teleservice
Effective as of 01-MAY-22
FQHC
CENTRO MEDICO EL CAJON,
Provider ID: PG0010260015
133 W MAIN ST STE 100
EL CAJON, CA 92020
(619) 873-8940
Effective as of 01-JAN-21
CHASE AVENUE FAMILY
C1. 網絡內提供者清單
初級保健提供者

HEALTH CTRS INC,
Provider ID: PG0025044040
1111 W CHASE AVE
EL CAJON, CA 92020
(619) 515-2499
Effective as of 01-JAN-21

FAMILY HLTH CTR SAN DIEGO-EL CAJON,
Provider ID: PG0084245003
525 E MAIN ST
EL CAJON, CA 92020
(619) 515-2498
Effective as of 01-JAN-21

LA MAESTRA CHC EL CAJON BROADWAY, *
Provider ID: PG0085229003
1032 BROADWAY
EL CAJON, CA 92021
(619) 795-5991
Effective as of 01-JAN-21

LA MAESTRA FAMILY CLINIC INC, *
Provider ID: PG0053396002
165 S 1ST ST
EL CAJON, CA 92019
(619) 312-0347
Teleservice
Effective as of 01-JAN-21

SAN YSIDRO HEALTH EL CAJON,
Provider ID: PG0111464002
875 EL CAJON BLVD
EL CAJON, CA 92020
(619) 662-4100
Teleservice
Effective as of 01-JAN-21

GENERAL PRACTICE
MOOSAVI, MOHAMMAD, MD**
Provider ID: 100339082002
343 E MAIN ST STE 102
EL CAJON, CA 92020
(619) 447-6001
Farsi
Effective as of 01-JUL-19

INTERNAL MEDICINE

AL-TAMEEMI, AHMED, MD***
Provider ID: 100338426004
133 W MAIN ST STE 100
EL CAJON, CA 92020
(619) 401-0404
Effective as of 01-NOV-20

AWDISHO, ALAN, DO***
Provider ID: 100381973002
875 EL CAJON BLVD
EL CAJON, CA 92020
(619) 662-4100
Teleservice
Effective as of 01-JAN-22

BENSON, JIMI, MD***
Provider ID: 100149523029
1351 BROADWAY
EL CAJON, CA 92021
(619) 383-6703
Spanish, Vietnamese
Teleservice
Effective as of 01-OCT-23

EL GLONEIMY, AHMED, MD***
Provider ID: 100103500015
165 S 1ST ST
EL CAJON, CA 92019
(619) 312-0347
Arabic
Teleservice
Effective as of 01-AUG-22

ELIAS, RAMIZ, MD***
Provider ID: 100105850047
231 W MAIN ST FL 2
EL CAJON, CA 92020
(619) 631-7300
Spanish
Effective as of 01-SEP-22

JAHANPANAH, FERESHTEH, MD***
Provider ID: 100076454007
343 E MAIN ST STE 101
EL CAJON, CA 92020
(619) 447-6001
Arabic, Faroese, Farsi
Effective as of 01-JUL-19

Spanish, Vietnamese
Effective as of 01-JUN-21

BENSON, JIMI, MD***
Provider ID: 100149523028
1351 BROADWAY
EL CAJON, CA 92021
(619) 383-6703
Spanish, Vietnamese
Effective as of 01-MAR-21
C1. 網絡內提供者清單
初級保健提供者

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<td>(619) 401-0404</td>
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<td>4401 MANCHESTER AVE STE 103 ENCINITAS, CA 92024</td>
<td>(858) 756-3021</td>
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<td><strong>AVILA, MICHAEL, MD</strong></td>
<td>460 N ELM ST ESCONDIDO, CA 92025</td>
<td>(833) 867-4642</td>
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<td>KAUR, JATINDER, MD</td>
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<td>460 N ELM ST, ESCONDIDO, CA 92025</td>
<td>(760) 520-8100</td>
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<td>PATEL, JITENBHAI, MD</td>
<td>100339325007</td>
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<td>(760) 737-6900</td>
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Your PCP’s provider group may have network providers for mental health services. Please see the list below. You can contact these providers directly. Please note, some services may require preauthorization from a mental health provider before they can be covered by Blue Shield.

You can access the mental health provider list online at blueshieldca.com/fad.
Network Providers List

C1. 網絡內提供者清單
初級保健提供者

Provider ID: PG0125224002
128 N BROADWAY
ESCONDIDO, CA 92025
(619) 515-2474
Effective as of 01-NOV-23

NEIGHBORHOOD
HEALTHCARE ESCONDIDO,
Provider ID: PG0024990052
460 N ELM ST
ESCONDIDO, CA 92025
(760) 520-8100
Teleservice
Effective as of 01-JUL-22

NEIGHBORHOOD
HEALTHCARE PEDIATRICS
AND PRENATAL,
Provider ID: PG0087195004
426 N DATE ST
ESCONDIDO, CA 92025
(760) 690-5900
Effective as of 01-JUL-22

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY,
Provider ID: PG0024990046
728 E VALLEY PKWY
ESCONDIDO, CA 92025
(760) 737-6900
Teleservice
Effective as of 01-JUL-22

PALOMAR FAMILY
COUNSELING SERVICES,
Provider ID: PG0125237002
1002 E GRAND AVE
ESCONDIDO, CA 92025
(619) 741-2660
Effective as of 01-DEC-23

SAN YSIDRO HEALTH
ESCONDIDO FAMILY
MEDICINE,
Provider ID: PG0094132003
704 E GRAND AVE
ESCONDIDO, CA 92025
(619) 662-4100
Effective as of 01-JUN-22

GENERAL PRACTICE
LOPEZ, IRMA, MD†‡
Provider ID: 100082249016
1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025
(760) 480-4747
Spanish
Effective as of 01-JAN-21

INTERNAL MEDICINE
CARRERA, JORGE, MD†‡
Provider ID: 100075629010
704 E GRAND AVE
ESCONDIDO, CA 92025
(619) 662-4100
Spanish
Teleservice
Effective as of 01-FEB-22

CHEN, MARGARET, MD†‡
Provider ID: 100184661008
460 N ELM ST
ESCONDIDO, CA 92025
(760) 520-8100
Greek, Spanish
Effective as of 01-MAR-24

DEEL, MARGARET, MD†‡
Provider ID: 100027747012
593 E ELDER ST STE B
FALLBROOK, CA 92028
(760) 723-5900
Spanish
Effective as of 01-AUG-20

DEEL, MARGARET, MD†‡
Provider ID: 100027747016
593 E ELDER ST STE B
FALLBROOK, CA 92028
(760) 723-5900
Spanish
Effective as of 01-OCT-14

DEEL, MARGARET, MD†‡
Provider ID: 100027747018
593 E ELDER ST STE B
FALLBROOK, CA 92028
(760) 723-5900
Spanish
Effective as of 01-MAR-24

DEEL, MARGARET, MD†‡
Provider ID: 100027747004
1328 S MISSION RD
FALLBROOK, CA 92028
(760) 451-4720
Effective as of 01-AUG-23

FAMILY PRACTICE
DEEL, MARGARET, MD†‡
Provider ID: 100082249016
1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025
(760) 480-4747
Spanish
Effective as of 01-JAN-21

DEEL, MARGARET, MD†‡
Provider ID: 100027747012
593 E ELDER ST STE B
FALLBROOK, CA 92028
(760) 723-5900
Spanish
Effective as of 01-AUG-20

DEEL, MARGARET, MD†‡
Provider ID: 100027747016
593 E ELDER ST STE B
FALLBROOK, CA 92028
(760) 723-5900
Spanish
Effective as of 01-OCT-14

DEEL, MARGARET, MD†‡
Provider ID: 100027747018
593 E ELDER ST STE B
FALLBROOK, CA 92028
(760) 723-5900
Spanish
Effective as of 01-MAR-24

PEDIATRICS
STRAZICICH, KARLA, MD†‡
Provider ID: 100080501007
426 N DATE ST
ESCONDIDO, CA 92025
(760) 690-5900
Effective as of 01-JAN-24

christie, patricia, md†‡
Provider ID: 100407567004
1328 S MISSION RD
FALLBROOK, CA 92028
(760) 451-4720
Effective as of 01-AUG-23

Your PCP’s doctor group may have its own network mental health service providers. Please refer to the following list. You can contact these providers directly. Please note, some services may require prior authorization from the mental health service provider before being covered under Blue Shield.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
### Network Provider List

#### Primary Care Providers

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<thead>
<tr>
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<td>100148562015</td>
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<td>(760) 728-8344</td>
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<td>100148562018</td>
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<tr>
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#### Internal Medicine

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<td>10092315007</td>
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#### FQHC

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<td>PG0072409011</td>
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For online access to the provider list, please visit [blueshieldca.com/fad](http://blueshieldca.com/fad).
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<td>PATEL, BAKULKUMAR, MD</td>
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<td>PEYMAN, HELYA, DO</td>
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<td>ANDERSON, ALBERT, MD</td>
<td>1000 E LATHAM AVE STE G HEMET, CA 92543</td>
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<td>ARIF, MUHAMMAD, MD</td>
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<td>COMBS, MATTHEW, MD</td>
<td>3853 W STETSON AVE STE 200 HEMET, CA 92545</td>
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<td>GANTA, SANYASI, MD</td>
<td>225 LAURSEN ST HEMET, CA 92543</td>
<td>(951) 925-6657</td>
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HEMEST, CA 92544

(951) 414-4011
Effective as of 01-OCT-22

HARRISON, AMY, MD†
Provider ID: 100047360075
2390 E FLORIDA AVE STE 104
HEMEST, CA 92544
(951) 414-4011
Effective as of 01-OCT-22

HARRISON, AMY, MD†
Provider ID: 100047360074
2390 E FLORIDA AVE STE 104
HEMEST, CA 92544
(951) 414-4011
Effective as of 01-OCT-22

HARRISON, AMY, MD†
Provider ID: 100410706005
2390 E FLORIDA AVE STE 104
HEMEST, CA 92544
(951) 414-4011
Effective as of 01-AUG-23

HARRISON, AMY, MD†
Provider ID: 100410706006
2390 E FLORIDA AVE STE 104
HEMEST, CA 92544
(951) 414-4011
Effective as of 01-AUG-23

HEIN, PETER, MD†
Provider ID: 100169562038
603 E LATHAM AVE
HEMEST, CA 92543
(951) 502-3500
Effective as of 01-NOV-22

HOWARD, NATHAN, MD*
Provider ID: 100053015006
850 E LATHAM AVE STE E
HEMEST, CA 92543
(951) 658-7205
Effective as of 01-JUL-23

HOWARD, NATHAN, MD*
Provider ID: 100053015004
850 E LATHAM AVE
HEMEST, CA 92543
(951) 658-7205
Effective as of 10-SEP-10

HUGHES, LARRY, MD†
Provider ID: 100049939002
4020 W FLORIDA AVE STE H
HEMEST, CA 92545
(951) 925-9565
Effective as of 01-SEP-09

HUGHES, HEATHER, MD†
Provider ID: 100050011003
4020 W FLORIDA AVE
HEMEST, CA 92545
(951) 925-9565
Effective as of 01-NOV-13

HUNT, TYRELLE, MD†
Provider ID: 100417653002
1701 E FLORIDA AVE
HEMEST, CA 92544
(951) 658-4486
Effective as of 01-NOV-23

MEHARDA, SANJIWANI, MD†
Provider ID: 100327486019
255 N GILBERT ST STE C2
HEMEST, CA 92543
(951) 694-8549
Effective as of 01-DEC-23

OBRIEN, KATHARINE, DO†
Provider ID: 100319273003
1600 E FLORIDA AVE STE 103
HEMEST, CA 92544
(951) 929-8121
Effective as of 01-DEC-17

YUN, JONATHAN, DO††
Provider ID: 100025475025
255 N GILBERT ST STE C2
HEMEST, CA 92543
(951) 599-8532
Korean, Spanish
Effective as of 01-NOV-20

YUN, JONATHAN, DO††
Provider ID: 100025475023
255 N GILBERT ST STE C2
HEMEST, CA 92543
(951) 599-8532
Korean, Spanish
Effective as of 01-AUG-20

GENERAL PRACTICE

EL-HENAWI, IGLAL, MD†
Provider ID: 100107885005
4020 W FLORIDA AVE
HEMEST, CA 92545
(951) 765-5000
Effective as of 01-SEP-15

EL-HENAWI, IGLAL, MD†
Provider ID: 100107885007
4020 W FLORIDA AVE
HEMEST, CA 92545
(951) 765-5000
Effective as of 01-AUG-20

EL-HENAWI, IGLAL, MD†
Provider ID: 100107885003
4020 W FLORIDA AVE
HEMEST, CA 92545
(951) 765-5000
### Network Provider List

**Primary Care Providers**

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<th>Provider Name</th>
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<td>Internal Medicine</td>
<td>100419896004</td>
<td>2390 E FLORIDA AVE STE 104</td>
<td>(833) 867-4642</td>
<td>Telugu</td>
<td>01-DEC-23</td>
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<td><strong>BARVE, PRANAV, MD</strong></td>
<td>Internal Medicine</td>
<td>100318437029</td>
<td>2390 E FLORIDA AVE STE 104</td>
<td>(951) 414-4011</td>
<td>Hindi, Marathi</td>
<td>01-AUG-21</td>
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<td><strong>BASAK, RYAN, MD</strong></td>
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<td>2390 E FLORIDA AVE STE 104</td>
<td>(951) 414-4011</td>
<td>Hindi, Marathi</td>
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<td><strong>BATIN, FRANCES, MD</strong></td>
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<td>100075999009</td>
<td>1001 S STATE ST</td>
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<td><strong>CHING, TSUNG, MD</strong></td>
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<td>1278 E LATHAM AVE</td>
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<td>Mandarin</td>
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<td>391 N SAN JACINTO ST</td>
<td>(951) 533-5123</td>
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C1. 網絡內提供者清單

初級保健提供者

SHALABY, MOHSEN, MD
Provider ID: 100306246002
391 N SAN JACINTO ST
HEMET, CA 92543
(951) 533-5123
Spanish
Effective as of 01-OCT-23

TAECHARVONGPHAIROJ, VEERAVAT, MD
Provider ID: 100226243014
903 E DEVONSHIRE AVE STE D
HEMET, CA 92543
(808) 578-3911
Thai
Effective as of 01-APR-21

PEDIATRICS
SEYED, KAZEM, MD
Provider ID: 100028573003
750 E LATHAM AVE STE 1
HEMET, CA 92543
(951) 658-7205
Thai
Effective as of 01-MAR-24

TAECHARVONGPHAIROJ, VEERAVAT, MD
Provider ID: 100226243018
1525 W FLORIDA AVE
HEMET, CA 92543
(951) 929-6777
Thai
Effective as of 01-OCT-21

CHANG, ALBERT, MD
Provider ID: 100086039014
15825 LAGUNA CANYON RD STE 202
IRVINE, CA 92618
(949) 585-9870
Korean, Spanish
Effective as of 01-JAN-17

HUANG, JANET, DO
Provider ID: 100007711005
18 ENDEAVOR STE 203
IRVINE, CA 92618
(949) 733-0168
Chinese, Mandarin, Taiwanese
Effective as of 01-JUL-23

IMPERIAL BEACH HEALTH CENTER,
Provider ID: PG0005455007
949 PALM AVE
IMPERIAL BEACH, CA 91932
(619) 429-3733
Teleservice
Effective as of 01-JUL-22

FAMILY PRACTICE

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

TAECHARVONGPHAIROJ, VEERAVAT, MD
Provider ID: 100028573009
750 E LATHAM AVE STE 1
HEMET, CA 92543
(951) 766-6696
Effective as of 01-AUG-20

SEYED, KAZEM, MD
Provider ID: 100028573003
750 E LATHAM AVE STE 1
HEMET, CA 92543
(951) 766-6696
Effective as of 01-OCT-10

35
<table>
<thead>
<tr>
<th>Provider Name</th>
<th>Specialty</th>
<th>ID Number</th>
<th>Address</th>
<th>Phone</th>
<th>Effective As Of</th>
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</thead>
<tbody>
<tr>
<td>MACAULEY, TODD, DO</td>
<td>DO</td>
<td>100337131058</td>
<td>8607 IRVINE CENTER DR, IRVINE, CA 92618</td>
<td>(949) 557-0600</td>
<td>01-JAN-21</td>
</tr>
<tr>
<td>NILI, ALAN, DO</td>
<td>DO</td>
<td>100093992004</td>
<td>18 ENDEAVOR STE 307, IRVINE, CA 92618</td>
<td>(949) 260-0106</td>
<td>01-JUL-12</td>
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<tr>
<td>NILI, ALAN, DO</td>
<td>DO</td>
<td>100093992002</td>
<td>18 ENDEAVOR STE 307, IRVINE, CA 92618</td>
<td>(949) 260-0106</td>
<td>01-JUL-12</td>
</tr>
<tr>
<td>SAAM, SHIDA, DO</td>
<td>DO</td>
<td>100093095027</td>
<td>16300 SAND CANYON AVE STE 602, IRVINE, CA 92618</td>
<td>(949) 783-1911</td>
<td>01-JUN-19</td>
</tr>
<tr>
<td>SAAM, SHIDA, DO</td>
<td>DO</td>
<td>100093095029</td>
<td>16300 SAND CANYON AVE STE 602, IRVINE, CA 92618</td>
<td>(949) 783-1911</td>
<td>01-JUN-19</td>
</tr>
<tr>
<td>SHEIDAYI, PERRY, DO</td>
<td>DO</td>
<td>100090804009</td>
<td>18 ENDEAVOR STE 201, IRVINE, CA 92618</td>
<td>(949) 650-5771</td>
<td>01-JAN-17</td>
</tr>
<tr>
<td>SAAM, SHIDA, DO</td>
<td>DO</td>
<td>100093095030</td>
<td>16300 SAND CANYON AVE STE 602, IRVINE, CA 92618</td>
<td>(949) 783-1911</td>
<td>01-JUN-19</td>
</tr>
<tr>
<td>SHEIDAYI, PERRY, DO</td>
<td>DO</td>
<td>100090804011</td>
<td>18 ENDEAVOR STE 201, IRVINE, CA 92618</td>
<td>(949) 650-5771</td>
<td>01-JAN-18</td>
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<tr>
<td>SAAM, SHIDA, DO</td>
<td>DO</td>
<td>100093095026</td>
<td>16300 SAND CANYON AVE STE 602, IRVINE, CA 92618</td>
<td>(949) 650-5771</td>
<td>01-OCT-16</td>
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<tr>
<td>YACOOB, MARLENE, MD</td>
<td>MD</td>
<td>100010305009</td>
<td>22 ODYSSEY STE 115, IRVINE, CA 92618</td>
<td>(949) 988-7550</td>
<td>01-OCT-16</td>
</tr>
</tbody>
</table>

*Provider ID:
1. **ht** indicates service is available in multiple languages.
2. **m** indicates service is available in Mandarin.
3. **f** indicates service is available in French.
4. **c** indicates service is available in Chinese.
5. **r** indicates service is available in Russian.
6. **t** indicates service is available in Teleservice.

Your PCP's physician group may have network mental health service providers. Please review the following list. You can contact these providers directly. Please note, certain services may require mental health service providers to obtain prior authorization from Blue Shield, then the service can be covered.

For online access to mental health service provider lists, please visit [blueshieldca.com/fad](https://blueshieldca.com/fad).
C1. 網絡內提供者清單
初級保健提供者

**GENERAL PRACTICE**

**ZAHEDI, MARCO, MD³**
Provider ID: 100308797011
16520 BAKE PKWY STE 115
IRVINE, CA 92618
(949) 857-4444
Farsi, Spanish
Effective as of 01-MAR-23

**KAMADA, SATOSHI, MD³**
Provider ID: 100048942006
15775 LAGUNA CANYON RD STE 280
IRVINE, CA 92618
(949) 453-1201
Japanese
Effective as of 01-JUL-12

**INTERNAL MEDICINE**

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

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

**RASHID, AHSAN, MD**
Provider ID: 100072526003
113 WATERWORKS WAY STE 250
IRVINE, CA 92618
(949) 753-1522
Arabic, Urdu
Effective as of 01-JAN-18

**SAISHO, ALBERT, MD**
Provider ID: 100077651006
15785 LAGUNA CANYON RD STE 340

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
IRVINE, CA 92618
(949) 262-0080
Japanese
Effective as of 01-OCT-22

SAISHO, ALBERT, MD†
Provider ID: 100077651004
15785 LAGUNA CANYON RD STE 340
IRVINE, CA 92618
(949) 262-0080
Japanese
Effective as of 01-JUL-12

SERAG, RANDA, MD‡
Provider ID: 100136797017
16300 SAND CANYON AVE STE 311
IRVINE, CA 92618
(949) 791-3101
Chinese, Mandarin
Effective as of 01-JAN-21

SHUNE, HONG, MD‡
Provider ID: 100196968014
16300 SAND CANYON AVE STE 311
IRVINE, CA 92618
(949) 791-3101
Chinese, Mandarin
Effective as of 01-JAN-21

SUN, YEMING, MD‡
Provider ID: 100022013010
113 WATERWORKS WAY STE 125
IRVINE, CA 92618
(949) 552-6788
Mandarin
Effective as of 01-AUG-20

WANG, WEI, MD†
Provider ID: 100345175004
16300 SAND CANYON AVE STE 311
IRVINE, CA 92618
(949) 791-3101
Effective as of 01-JAN-21

**PEDIATRICS**

BILLECI, BARTON, MD†
Provider ID: 100022620004
9850 GENEESE AVE STE 320
LA JOLLA, CA 92037
(858) 554-1212
Hindi, Urdu
Teleservice
Effective as of 01-OCT-15

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

**FAMILY PRACTICE**

AHMED, HEBA, DO‡
Provider ID: 100405870007
9850 GENEESE AVE STE 320
LA JOLLA, CA 92037
(858) 450-5900
Russian
Teleservice
Effective as of 01-MAY-21

AHMED, HEBA, DO‡
Provider ID: 100405870003
9850 GENEESE AVE STE 320
LA JOLLA, CA 92037
(858) 554-1212
Russian
Teleservice
Effective as of 01-JUN-23

AHMED, HEBA, DO‡
Provider ID: 100405870002
9850 GENEESE AVE STE 320
LA JOLLA, CA 92037
(858) 554-1212
Russian
Teleservice
Effective as of 01-JUL-21

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

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

DEMBO-SMEATON, ELENA, MD‡
Provider ID: 100112789011
8950 VILLA LA JOLLA DR
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<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Languages</th>
<th>Specialty</th>
<th>Provider ID</th>
<th>Effective Date</th>
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<tr>
<td>GOLD, MARGARET, MD</td>
<td>8950 VILLA LA JOLLA DR</td>
<td>(858) 450-5900</td>
<td>Russian</td>
<td>INTERNAL MEDICINE</td>
<td>100231182005</td>
<td>01-JUL-21</td>
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<td>RIVERA, MIDORI, MD</td>
<td>9850 GENESEE AVE STE</td>
<td>(858) 554-1212</td>
<td>Japanese, Spanish</td>
<td>FAMILY PRACTICE</td>
<td>10011732028</td>
<td>01-APR-24</td>
</tr>
<tr>
<td>VAZQUEZ-BOJORQUEZ, ALEJANDRA, MD</td>
<td>9850 GENESEE AVE STE</td>
<td>(858) 554-1212</td>
<td>Spanish</td>
<td>INTERNAL MEDICINE</td>
<td>100391945014</td>
<td>01-DEC-23</td>
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<tr>
<td>WU, ARMANDO, MD</td>
<td>9850 GENESEE AVE STE</td>
<td>(858) 864-9800</td>
<td>French, Italian, Spanish</td>
<td>FAMILY PRACTICE</td>
<td>100381137002</td>
<td>01-MAR-22</td>
</tr>
<tr>
<td>WU, ARMANDO, MD</td>
<td>9850 GENESEE AVE STE</td>
<td>(858) 864-9800</td>
<td>French, Italian, Spanish</td>
<td>GENERAL PRACTICE</td>
<td>100381137007</td>
<td>01-MAR-22</td>
</tr>
<tr>
<td>WU, ARMANDO, MD</td>
<td>9850 GENESEE AVE STE</td>
<td>(858) 864-9800</td>
<td>French, Italian, Spanish</td>
<td>GENERAL PRACTICE</td>
<td>100381137005</td>
<td>01-APR-23</td>
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<tr>
<td>BADALYAN, SEDA, MD</td>
<td>9850 GENESEE AVE STE</td>
<td>(858) 457-5555</td>
<td>Armenian, Russian</td>
<td>INTERNAL MEDICINE</td>
<td>100032508028</td>
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<td>BADALYAN, SEDA, MD</td>
<td>9850 GENESEE AVE STE</td>
<td>(858) 457-5555</td>
<td>Armenian, Russian</td>
<td>INTERNAL MEDICINE</td>
<td>10032508023</td>
<td>01-SEP-22</td>
</tr>
<tr>
<td>RANA, SHAUNAK, MD</td>
<td>9850 GENESEE AVE STE</td>
<td>(858) 554-1212</td>
<td>Spanish</td>
<td>FAMILY PRACTICE</td>
<td>100194770019</td>
<td>01-FEB-22</td>
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<tr>
<td>RANA, SHAUNAK, MD</td>
<td>9850 GENESEE AVE STE</td>
<td>(858) 554-1212</td>
<td>Spanish</td>
<td>FAMILY PRACTICE</td>
<td>100194770021</td>
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<td>RANA, SHAUNAK, MD</td>
<td>7855 IVANHOE AVE STE</td>
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<td>FAMILY PRACTICE</td>
<td>100194770013</td>
<td>01-FEB-22</td>
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C1. 網絡內提供者清單

初級保健提供者

- **LA JOLLA, CA 92037**
  - **RANA, SHAUNAK, MD**
    Provider ID: 100194770022
    7855 IVANHOE AVE STE 110
    LA JOLLA, CA 92037
    - (858) 799-0933
    - Effective as of 01-SEP-22
  - **NGUYEN, DAT, MD**
    Provider ID: 100047564021
    5565 GROSSMONT CENTER DR STE 229
    LA MESA, CA 91942
    - (858) 349-3760
    - Effective as of 01-MAR-24

- **PATERSON, HEMANSHU, MD**
  Provider ID: 100282252013
  7339 EL CAJON BLVD STE I
  LA MESA, CA 91942
  - (619) 698-0606
  - Effective as of 01-SEP-18

- **WAINWRIGHT, MITCHELL, MD**
  Provider ID: 100096772018
  800 CORPORATE DR STE 100
  LADERA RANCH, CA 92694
  - (949) 364-9112
  - Effective as of 01-SEP-19

FAMILY PRACTICE

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

- **SHAHBAZ, MAJID, MD**
  Provider ID: 100090790008
  8851 CENTER DR STE 408
  LA MESA, CA 91942
  - (619) 583-1174
  - Faroese, Farsi, Tagalog
  - Effective as of 01-MAR-24

- **SHAHBAZ, MAJID, MD**
  Provider ID: 1000907900020
  8851 CENTER DR STE 408
  LA MESA, CA 91942
  - (619) 583-1174
  - Faroese, Farsi, Tagalog
  - Effective as of 01-MAR-23

- **SHAHBAZ, MAJID, MD**
  Provider ID: 1000907900018
  8851 CENTER DR STE 408
  LA MESA, CA 91942
  - (619) 583-1174
  - Faroese, Farsi, Tagalog
  - Effective as of 01-JAN-21

- **SHAHBAZ, MAJID, MD**
  Provider ID: 1000907900019
  8851 CENTER DR STE 408
  LA MESA, CA 91942
  - (619) 583-1174
  - Faroese, Farsi, Tagalog
  - Effective as of 01-JAN-21

INTERNAL MEDICINE

- **ELSANADI, RAEF, MD**
  Provider ID: 100040631004
  333 CORPORATE DR STE 210
  LADERA RANCH, CA 92694
  - (949) 364-3582
  - Arabic
  - Effective as of 01-SEP-20

- **ALAMAR, ALI, MD**
  Provider ID: 100106664014
  5565 GROSSMONT CENTER DR BLDG 1 STE 105
  LA MESA, CA 91942
  - (619) 724-6644
  - Arabic, Spanish
  - Effective as of 01-JAN-21

- **PATEL, HEMANSHU, MD**
  Provider ID: 100282252013
  7339 EL CAJON BLVD STE I
  LA MESA, CA 91942
  - (619) 698-0606
  - Effective as of 01-SEP-24

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

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

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

- **DEWING, JANNE, MD**
  Provider ID: 100105400007
  31862 COAST HWY STE 200
  LAGUNA BEACH, CA 92651
  - (949) 557-0610
  - Effective as of 01-AUG-21
C1. 網絡內提供者清單

初級保健提供者

- **FAMILY PRACTICE**

  **CHANG, MICHAEL, DO**  
  Provider ID: 100294076006  
  26538 MOULTON PKWY STE 38E  
  LAGUNA HILLS, CA 92653  
  (949) 448-0656  
  Effective as of 01-AUG-18

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

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

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

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

  **Khoshreza, Haleh, MD**  
  Provider ID: 100383918002  
  26538 MOULTON PKWY STE 38E  
  LAGUNA HILLS, CA 92653  
  (949) 448-0656  
  Farsi, German  
  Effective as of 01-MAR-22

  **Leish, Brian, MD**  
  Provider ID: 100103119055  
  24411 HEALTH CENTER DR STE 460  
  LAGUNA HILLS, CA 92653  
  (949) 373-7799  

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

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

  **Munib, Sabeen, MD**  
  Provider ID: 100168805028  
  23181 LA CADENA DR STE 101  
  LAGUNA HILLS, CA 92653  
  (949) 647-5234  
  Effective as of 01-OCT-20

  **Munib, Sabeen, MD**  
  Provider ID: 100168805025  
  23181 LA CADENA DR STE 101  
  LAGUNA HILLS, CA 92653  
  (949) 647-5234  
  Effective as of 01-FEB-20

  **Munib, Sabeen, MD**  
  Provider ID: 100168805030  
  23181 LA CADENA DR STE 101  
  LAGUNA HILLS, CA 92653  
  (949) 647-5234  
  Effective as of 01-MAR-21

  **Rivero, Jorge, MD**  
  Provider ID: 100059240008  

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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
初級保健提供者

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

GENERAL PRACTICE

INTERNAL MEDICINE
C1. 網絡內提供者清單

初級保健提供者

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

CHANG, KU JUEY, MD
Provider ID: 100079645006
23141 MOULTON PKWY STE 102
LAGUNA HILLS, CA 92653
(949) 916-9100
 Chinese
Effective as of 01-JUN-19

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

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

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

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

BROWN, HOSEA, MD
Provider ID: 100017878018
25431 CABOT RD STE 118
LAGUNA HILLS, CA 92653
(949) 362-8877
 Spanish
Effective as of 01-NOV-16

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

COVARRUBIAS, GRACIA, MD
Provider ID: 100199548017
24268 EL TORO RD
LAGUNA HILLS, CA 92637
(657) 241-8455
 Spanish
Effective as of 01-SEP-21

COVARRUBIAS, GRACIA, MD
Provider ID: 100199548016
24268 EL TORO RD
LAGUNA HILLS, CA 92637
(657) 241-8455
 Spanish
Effective as of 01-MAR-20

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

DAIGNEAULT, ARTHUR, MD
Provider ID: 100016238005
23961 CALLE DE LA MAGDALENA STE 429
LAGUNA HILLS, CA 92653
(949) 452-1930
 Effective as of 01-MAR-19

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

HENDERSON, RAY, MD
Provider ID: 1000063427004
24221 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
(949) 588-8700
 Effective as of 01-JAN-18

HUSEBY, DAVID, MD
Provider ID: 100091780005
24411 HEALTH CENTER DR STE 460
LAGUNA HILLS, CA 92653
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<td>Javaheri, Mani Jeh, MD</td>
<td>100111565009</td>
<td>23961 Calle De La Magdalena Ste 430</td>
<td>(949) 770-8100</td>
<td>Farsi, Turkish</td>
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<td>Kaura, Maya, MD</td>
<td>100011471005</td>
<td>24953 Paseo De Valencia Ste 22A</td>
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<td>(949) 716-4555</td>
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<td>Lo, Alan, MD</td>
<td>100022892004</td>
<td>25401 Cabot Rd Ste 101</td>
<td>(949) 768-4850</td>
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<td>Manasson, Katherine, MD</td>
<td>100113316013</td>
<td>24422 Avenida De La Carlota Ste 272</td>
<td>(949) 446-6783</td>
<td>Russian</td>
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<td>Manasson, Katherine, MD</td>
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<td>24422 Avenida De La Carlota Ste 272</td>
<td>(949) 446-6783</td>
<td>Russian</td>
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<td>100332508008</td>
<td>23141 Moulton Pkwy Ste 102</td>
<td>(949) 916-9100</td>
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<td>(949) 334-8200</td>
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<td>23141 Moulton Pkwy Ste 102</td>
<td>(949) 855-2279</td>
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<td>(949) 716-9100</td>
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Initial Health Care Providers

**STALLWORTH, ROXANNE, MD**
Provider ID: 100021573002
Address: 24321 AVENIDA DE LA CARLOTA
LAGUNA HILLS, CA 92653
Phone: (949) 204-3006
Languages: Farsi, Spanish
Effective as of 01-AUG-22

**ERNST, DANIEL, MD**
Provider ID: 100033007005
Address: 24411 HEALTH CENTER DR STE 460
LAGUNA HILLS, CA 92653
Phone: (949) 373-7799
Language: Spanish
Effective as of 01-JAN-18

**STRODTBECK, PAUL, MD**
Provider ID: 100081005002
Address: 25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Phone: (949) 273-8085
Languages: Dutch, Farsi
Effective as of 01-JAN-18

**TRAN, CECILIA, MD**
Provider ID: 100095684012
Address: 32341 GOLDEN LANTERN STE D
LAGUNA NIGUEL, CA 92677
Phone: (949) 363-9595
Languages: Mandarin, Spanish
Effective as of 01-JUN-22

**ZAREMBA, MARK, MD**
Provider ID: 100021573002
Address: 25401 CABOT RD STE 107
LAGUNA HILLS, CA 92653
Phone: (949) 273-8085
Effective as of 01-JAN-13

**FAMILY PRACTICE**

**BEDRAN, ASAD, DO**
Provider ID: 100347139005
Address: 27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677
Phone: (949) 643-9111
Effective as of 01-SEP-20

**BELLO, JUSTINE, MD**
Provider ID: 100281688002
Address: 27231 LA PAZ RD STE A
LAGUNA NIGUEL, CA 92677
Phone: (949) 643-9111
Effective as of 01-SEP-16

**BREWER, SARAH, MD**
Provider ID: 100281677007
Address: 32341 GOLDEN LANTERN STE D
LAGUNA NIGUEL, CA 92677
Phone: (949) 363-9595
Effective as of 01-FEB-21

**FU, KAREN, MD**
Provider ID: 100095684012
Address: 32341 GOLDEN LANTERN STE D
LAGUNA NIGUEL, CA 92677
Phone: (949) 363-9595
Languages: Mandarin, Spanish
Effective as of 01-JUN-22
C1. 網絡內提供者清單
初級保健提供者

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<th>Provider ID</th>
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<td>(949) 831-0300</td>
<td>Dutch, Farsi</td>
<td>01-SEP-19</td>
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<tr>
<td>100197006019</td>
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<td>100035402010</td>
<td>30281 GOLDEN LANTERN, LAGUNA NIGUEL, CA 92677</td>
<td>(949) 495-7144</td>
<td>Gujarati, Hindi</td>
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<td>100074767005</td>
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<td>(949) 495-7144</td>
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**PEDIATRICS**

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<td>30281 GOLDEN LANTERN, LAGUNA NIGUEL, CA 92677</td>
<td>(949) 495-7144</td>
<td>Gujarati, Hindi</td>
<td>01-SEP-22</td>
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<td>100113408008</td>
<td>24268 EL TORO RD, LAGUNA WOODS, CA 92637</td>
<td>(657) 241-8455</td>
<td>Farsi</td>
<td>01-JAN-21</td>
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<tr>
<td>100113408016</td>
<td>24331 EL TORO RD STE 330, LAGUNA WOODS, CA 92637</td>
<td>(951) 471-1800</td>
<td>Korean, Mandarin, Spanish</td>
<td>01-DEC-14</td>
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<tr>
<td>100187138015</td>
<td>31946 MISSION TRL STE A, LAKE ELSINORE, CA 92530</td>
<td>(951) 471-1800</td>
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<tr>
<td>100187138016</td>
<td>31946 MISSION TRL STE A, LAKE ELSINORE, CA 92530</td>
<td>(951) 471-1800</td>
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C1. 網絡內提供者清單
初級保健提供者

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

**GENERAL PRACTICE**

**ASPREC, JOSEPH, MD**
Provider ID: 100070994004
- 31571 CANYON ESTATES DR STE 132
  LAKE ELSINORE, CA 92532
  (951) 674-7811
- Spanish, Tagalog
  Effective as of 01-JUL-22

**MONARREZ, DAVID, MD**
Provider ID: 100102954012
- 31739 RIVERSIDE DR STE A1
  LAKE ELSINORE, CA 92530
  (951) 245-0505
- Spanish
  Effective as of 01-OCT-18

**MONARREZ, DAVID, MD**
Provider ID: 100102954016
- 31739 RIVERSIDE DR STE A1
  LAKE ELSINORE, CA 92530
  (951) 245-0505
- Spanish
  Effective as of 01-JUL-22

**OLIVEIRA, THOMAS, DO**
Provider ID: 100088827007
- 506 W GRAHAM AVE STE 107
  LAKE ELSINORE, CA 92530
  (951) 471-5116
- Italian, Spanish
  Effective as of 01-APR-21

**INTERNAL MEDICINE**

**BAJWA, SAIF, MD**
Provider ID: 100113080002
- 16800 LAKESHORE DR STE 2
- LAKE ELSINORE, CA 92530
  (951) 674-2155
- Spanish, Urdu
  Effective as of 01-APR-17

**SAADAT, FARID, MD**
Provider ID: 100013848002
- 425 DIAMOND DR STE 102
  LAKE ELSINORE, CA 92530
  (951) 471-5711
- Farsi, Persian
  Effective as of 01-OCT-18

**FAMILY PRACTICE**

**AHSAN, NUSRAT, MD**
Provider ID: 100113788007
- 22621 LAKE FOREST DR STE D1
  LAKE FOREST, CA 92630
  (949) 242-6902
- Hindi
  Effective as of 01-MAY-17

**ALI, MOHAMMED, MD**
Provider ID: 100114282032
- 23672 BIRTHCHER DR STE A
  LAKE FOREST, CA 92630
  (949) 770-7301
- Hindi, Telugu, Urdu
  Effective as of 01-JAN-14

**ALI, MOHAMMED, MD**
Provider ID: 100114282022
- 23672 BIRTHCHER DR STE A
  LAKE FOREST, CA 92630
  (949) 770-7301
- Hindi, Telugu, Urdu
  Effective as of 01-DEC-16

**ALI, MOHAMMED, MD**
Provider ID: 100114282064
- 23672 BIRTHCHER DR STE A
  LAKE FOREST, CA 92630
  (949) 770-7301
- Hindi, Telugu, Urdu
  Effective as of 01-OCT-22

**KOUMAS, MARY, DO**
Provider ID: 100089870008
- 24401 MUIRLANDS BLVD STE A
  LAKE FOREST, CA 92630
  (949) 770-1950
- Effective as of 01-MAR-22

**KOUMAS, JOHN, DO**
Provider ID: 100064961008
- 24401 MUIRLANDS BLVD STE A
  LAKE FOREST, CA 92630
  (949) 770-7301
- Hindi, Telugu, Urdu
  Effective as of 01-JAN-17
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<td>24401 MUIRLANDS BLVD STE A LAKE FOREST, CA 92630</td>
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<td>(949) 242-6902</td>
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<td>100320650014</td>
<td>10039 VINE ST LAKESIDE, CA 92040</td>
<td>(619) 390-9975</td>
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<td>100397531003</td>
<td>10039 VINE ST LAKESIDE, CA 92040</td>
<td>(858) 218-3000</td>
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<td>(951) 676-4193</td>
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<td>Punjabi, Spanish, Urdu</td>
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**Note:** The above list includes information about healthcare providers and their contact details. The effective dates and language options are also provided. This list is a snapshot of the healthcare providers available as of the specified dates.
C1. 網絡內提供者清單
初級保健提供者

- Spanish
  Effective as of 01-AUG-23

HARRISON, AMY, MD
Provider ID: 100410706003
29826 HAUN RD STE 200 MENIFEE, CA 92586
(951) 414-4020
Spanish
Effective as of 01-OCT-22

INTERNAL MEDICINE

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

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

GONZALES, EDIVINA, MD
Provider ID: 100392200005
29798 HAUN RD STE 106 MENIFEE, CA 92586
(951) 301-3588
Spanish, Tagalog
Effective as of 01-OCT-10

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

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

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

- Spanish
  Effective as of 01-AUG-23

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

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

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

ZURITA, DANIELA, MD
Provider ID: 100396617009
26926 CHERRY HILLS BLVD STE C MENIFEE, CA 92586
(951) 216-2200
Spanish
Effective as of 01-AUG-23

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

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

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

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

GONZALES, EDIVINA, MD
Provider ID: 100392200005
29798 HAUN RD STE 106 MENIFEE, CA 92586
(951) 301-3588
Effective as of 01-OCT-10

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

GONZALES, EDIVINA, MD
Provider ID: 100392200005
29798 HAUN RD STE 106 MENIFEE, CA 92586
(951) 301-3588
Effective as of 01-OCT-10

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

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

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

Spanish
Effective as of 01-AUG-23

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

ARANETA, TOMAS, MD
Provider ID: 100036305006
29826 HAUN RD STE 201 MENIFEE, CA 92586
(951) 301-1100
Spanish, Tagalog
Effective as of 01-OCT-22
C1. 網絡內提供者清單

初級保健提供者

---

- **Spanish**
  - Effective as of 01-JUN-22

**FAMILY PRACTICE**

**BALL-ZONDERVAN, MONICA, MD**

Provider ID: 100294482047

- 26732 CROWN VALLEY PKWY STE 170
- MISSION VIEJO, CA 92691
- (949) 364-7246

Effective as of 01-SEP-19

---

**Spanish**
- Effective as of 01-DEC-21

**BISUNA, BLANCA, MD**

Provider ID: 100199166013

- 26732 CROWN VALLEY PKWY STE 170
- MISSION VIEJO, CA 92691
- (949) 364-7246

Effective as of 01-MAR-16

---

**Spanish**
- Effective as of 01-JUN-22

**BARE, IAN, MD**

Provider ID: 100110113009

- 30492 GATEWAY PL STE 110
- MISSION VIEJO, CA 92694
- (949) 542-7700

Effective as of 01-JUN-21

---

**Spanish**
- Effective as of 01-JUN-22

**BARE, IAN, MD**

Provider ID: 100110113017

- 30492 GATEWAY PL STE 110
- MISSION VIEJO, CA 92694
- (949) 542-7700

Effective as of 01-JUN-21

---

**Spanish**
- Effective as of 01-JUN-22

**BASICH, CANDACE, MD**

Provider ID: 100073084008

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

Effective as of 01-SEP-18

---

**Spanish**
- Effective as of 01-JUN-22

**BASICH, CANDACE, MD**

Provider ID: 100073084010

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

Effective as of 01-SEP-18

---

**Spanish**
- Effective as of 01-DEC-21

**ENDSLEY, DELVIN, MD**

Provider ID: 100413682015

- 27725 SANTA MARGARITA PKWY STE 101
- MISSION VIEJO, CA 92691
- (949) 270-2100

Effective as of 01-MAR-24

---

**Spanish**
- Effective as of 01-JAN-18

**FIGHTLIN, STEFANIE, DO**

Provider ID: 100086847010

- 26991 CROWN VALLEY PKWY
- MISSION VIEJO, CA 92691
- (949) 582-5430

Effective as of 01-JAN-18

---

**Spanish**
- Effective as of 01-DEC-19

**FLORES, TERESA, MD**

Provider ID: 100207722054

- 27725 SANTA MARGARITA PKWY STE 101
- MISSION VIEJO, CA 92691
- (949) 270-2100

Effective as of 01-DEC-19

---

**Spanish**
- Effective as of 01-DEC-19

**GEBHARD, KARL, MD**

Provider ID: 100071312010

- 26922 OSO PKWY STE 380
- MISSION VIEJO, CA 92691
- (949) 305-0110

Effective as of 01-JAN-18
C1. 網絡內提供者清單

初級保健提供者

GEBHARD, KARL, MD
Provider ID: 100071312004
26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691
(949) 305-0110
Effective as of 01-MAR-16

GEBHARD, KARL, MD
Provider ID: 100071312013
26922 OSO PKWY STE 380
MISSION VIEJO, CA 92691
(949) 305-0110
Effective as of 01-JUN-19

GLOBUS, JEFFREY, MD
Provider ID: 100008104012
26902 OSO PKWY STE 140
MISSION VIEJO, CA 92691
(949) 916-8870
Spanish
Effective as of 01-OCT-22

GLOBUS, JEFFREY, MD
Provider ID: 100008104009
26902 OSO PKWY STE 140
MISSION VIEJO, CA 92691
(949) 916-8870
Spanish
Effective as of 01-JAN-17

GLOBUS, JEFFREY, MD
Provider ID: 100008104004
26902 OSO PKWY STE 140
MISSION VIEJO, CA 92691
(949) 916-8870
Spanish
Effective as of 01-DEC-14

GONZALEZ, DAVID, MD
Provider ID: 100096155006
26732 CROWN VALLEY PKWY STE 170
MISSION VIEJO, CA 92691
(949) 364-7246
Effective as of 01-OCT-18

KUMAR, NISHchal, MD
Provider ID: 100224908009
23512 MADERO
MISSION VIEJO, CA 92691
(949) 583-1600
Hindi, Punjabi, Spanish
Effective as of 01-SEP-21

KUMAR, NISHchal, MD
Provider ID: 100224908011
23512 MADERO
MISSION VIEJO, CA 92691
(949) 583-1600
Effective as of 01-NOV-19

LY, PHUONG, MD
Provider ID: 100354280025
26800 CROWN VALLEY PKWY STE 150
MISSION VIEJO, CA 92691
(949) 276-2111
Vietnamese
Effective as of 01-AUG-22

PEDARSANI, MARJAN, DO
Provider ID: 100112028003
26732 CROWN VALLEY PKWY STE 170
MISSION VIEJO, CA 92691
(949) 583-1600
Farsi
Effective as of 01-SEP-21

PEDARSANI, MARJAN, DO
Provider ID: 100113548005
23512 MADERO
MISSION VIEJO, CA 92691
(949) 583-1600
Farsi
Effective as of 01-MAY-12

 PEDARSANI, MARJAN, DO
Provider ID: 100113548012
23512 MADERO
MISSION VIEJO, CA 92691
(949) 583-1600
Farsi
Effective as of 01-AUG-21

RUTTEN, SONIA, MD
Provider ID: 100414034002
30492 GATEWAY PL STE 110
MISSION VIEJO, CA 92691
(949) 542-7700
Effective as of 01-OCT-23

SAMOORI, RAMA, DO
Provider ID: 100112028003
26732 CROWN VALLEY PKWY STE 170
MISSION VIEJO, CA 92691
(949) 583-1600
Farsi, Spanish
Effective as of 01-SEP-15

SHOAPOUR, CAMELLIA, MD
Provider ID: 100396167003
26991 CROWN VALLEY PKWY STE 100
MISSION VIEJO, CA 92691
(949) 582-5430
Farsi, Persian
Effective as of 01-MAR-23

THOMAS, CHERYL, MD
Provider ID: 100043536017
27725 SANTA MARGARITA PKWY STE 101
MISSION VIEJO, CA 92691
(949) 270-2100
Effective as of 01-AUG-21

THOMAS, CHERYL, MD
Provider ID: 100043536023
27725 SANTA MARGARITA PKWY STE 101
MISSION VIEJO, CA 92691
(949) 270-2100
Effective as of 01-AUG-21

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

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

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

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

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

GENERAL PRACTICE
JANISZEWSKI, EVA, MD

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

BADIE, MEHRNAZ, MD
Provider ID: 100074899004
26800 CROWN VALLEY PKWY STE 305
MISSION VIEJO, CA 92691
(949) 364-6000
Farsi
Effective as of 01-NOV-12

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

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

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

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

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

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

NGUYEN, VY, MD
Provider ID: 100105037006
26800 CROWN VALLEY PKWY STE 305
MISSION VIEJO, CA 92691
(949) 364-6000
Vietnamese
Effective as of 01-NOV-12

NIETO, ELIZABETH, MD
Provider ID: 100364838002
26800 CROWN VALLEY PKWY STE 315
MISSION VIEJO, CA 92691
(949) 364-6000
Spanish
Effective as of 01-SEP-18
C1. 網絡內提供者清單
初級保健提供者

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

NIETO, ELIZABETH, MD\*†
Provider ID: 100364838004
26800 CROWN VALLEY PKWY STE 25
MISSION VIEJO, CA 92691
(949) 364-6000
Effective as of 01-OCT-22

NOORIAN, NADER, MD\*†
Provider ID: 100052175006
26800 CROWN VALLEY PKWY STE 305
MISSION VIEJO, CA 92691
(949) 364-6000
Effective as of 01-AUG-22

PRATT, DONALD, MD\*†
Provider ID: 100088649011
26800 CROWN VALLEY PKWY STE 325
MISSION VIEJO, CA 92691
(949) 364-6000
Effective as of 01-AUG-22

ROKHSHADFAR, SAGHI, MD\*†
Provider ID: 100113408005
23512 MADERO
MISSION VIEJO, CA 92691
(949) 583-1600
Farsi
Effective as of 01-AUG-20

ROKHSHADFAR, SAGHI, MD\*†
Provider ID: 100113408006
23512 MADERO
MISSION VIEJO, CA 92691
(949) 583-1600
Farsi
Effective as of 01-MAY-12

SEFIGSOHN, BRUCE, MD\*†
Provider ID: 100021098007
26302 LA PAZ RD STE 211
MISSION VIEJO, CA 92691
(949) 588-8775
Spanish
Effective as of 01-JAN-18

SERGEYEV, YELENA, MD\*†
Provider ID: 100403248005
27800 MEDICAL CENTER RD STE 110
MISSION VIEJO, CA 92691
(949) 364-3532
Russian
Teleservice
Effective as of 01-DEC-23

SERGEYEV, YELENA, MD\*†
Provider ID: 100403248004
27800 MEDICAL CENTER RD STE 110
MISSION VIEJO, CA 92691
(949) 364-3532
Russian
Teleservice
Effective as of 01-DEC-23

SERGEYEV, YELENA, MD\*†
Provider ID: 100403248007
27800 MEDICAL CENTER RD STE 110
MISSION VIEJO, CA 92691
(949) 364-3532
Russian
Teleservice
Effective as of 01-DEC-23

SERGEYEV, YELENA, MD\*†
Provider ID: 100403248003
27800 MEDICAL CENTER RD STE 110
MISSION VIEJO, CA 92691
(949) 364-3532
Russian
Teleservice
Effective as of 01-JUL-19

STALLWORTH, ROXANNE, MD\*†
Provider ID: 100185861008
26800 CROWN VALLEY PKWY STE 315
MISSION VIEJO, CA 92691
(949) 364-6000
Farsi, Spanish
Effective as of 01-AUG-19

STAUNTON, MICHÉLE, MD\*†
Provider ID: 100043245010
26800 CROWN VALLEY PKWY STE 330
MISSION VIEJO, CA 92691
(949) 364-6000
Effective as of 01-NOV-14

STAUNTON, MICHÉLE, MD\*†
Provider ID: 100043245014
26800 CROWN VALLEY PKWY STE 325
MISSION VIEJO, CA 92691
(949) 364-6000
Effective as of 01-AUG-22

SWADENER, NINA, MD\*†
Provider ID: 100219528002
26800 CROWN VALLEY PKWY STE 305
MISSION VIEJO, CA 92691
(949) 364-6000
Spanish
Effective as of 01-NOV-14

TRUONG, ANDREW, MD\*†
Provider ID: 100344383002
26800 CROWN VALLEY PKWY STE 305
MISSION VIEJO, CA 92691
(949) 364-6000
Vietnamese
Effective as of 01-JUL-19

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
初級保健提供者

**TSAI, MON TA, MD**
Provider ID: 100060379006
25982 PALA STE 250
MISSION VIEJO, CA 92691
(949) 588-0051
Chinese, Mandarin, Taiwanese
Effective as of 01-JAN-18

**WADELL, CHAD, MD**
Provider ID: 100108309006
26800 CROWN VALLEY PKWY STE 315
MISSION VIEJO, CA 92691
(949) 364-6000
Effective as of 01-NOV-14

**YAZDI, JANET, MD**
Provider ID: 100086097007
26800 CROWN VALLEY PKWY STE 305
MISSION VIEJO, CA 92691
(949) 364-6000
Effective as of 01-MAR-13

**FAMILY PRACTICE**

**BREWER, ANH, DO**
Provider ID: 100260727007
27722 CLINTON KEITH RD BLDG F
MURRIETA, CA 92562
(951) 878-9820
Vietnamese
Effective as of 01-NOV-20

**BREWER, ANH, DO**
Provider ID: 100260727002
27722 CLINTON KEITH RD BLDG F
MURRIETA, CA 92562
(951) 878-9820
Vietnamese
Effective as of 01-FEB-16

*BRIGGS, BRIDGET, MD*
Provider ID: 100069323004
25470 MEDICAL CENTER DR STE 102
MURRIETA, CA 92562
(951) 698-6090
Spanish
Effective as of 01-SEP-10

**MCKERAHAN, KELLY, DO**
Provider ID: 100031842003
25095 JEFFERSON AVE STE 202
MURRIETA, CA 92562
(951) 696-9566
Effective as of 01-JUN-03

**MEHARDA, SANJIWANI, MD**
Provider ID: 100327486018
24910 LAS BRISAS RD STE 111
MURRIETA, CA 92562
(951) 694-8549
Hindi, Punjabi, Urdu
Effective as of 01-DEC-23

**NGUYEN, BACH, MD**
Provider ID: 100107585007
41680 IVY ST STE A
MURRIETA, CA 92562
(951) 677-2227
Vietnamese
Effective as of 01-NOV-23

**NGUYEN, BACH, MD**
Provider ID: 100107585005
41680 IVY ST STE A
MURRIETA, CA 92562
(951) 677-2227
Vietnamese
Effective as of 01-OCT-22

**PHILLIPS, LILY, MD**
Provider ID: 100343557003
38860 SKY CANYON DR BLDG A
MURRIETA, CA 92563
(951) 676-4193
Effective as of 01-AUG-19

**WALTER, ROME, DO**
Provider ID: 100198386003
41011 CALIFORNIA OAKS RD STE 103
MURRIETA, CA 92562
(951) 225-6287
Effective as of 01-JUN-19

**YUN, JONATHAN, DO**
Provider ID: 100025475022
24910 LAS BRISAS RD STE 111
MURRIETA, CA 92562
(951) 694-8549
Korean, Spanish
Effective as of 01-AUG-20

**YUN, JONATHAN, DO**
Provider ID: 100025475024
24910 LAS BRISAS RD STE 111
MURRIETA, CA 92562
C1. 網絡內提供者清單
初級保健提供者

### GENERAL PRACTICE

**LULIC, DZENAN, MD**
Provider ID: 100283060006
- 40700 CALIFORNIA OAKS RD STE 206
- MURRIETA, CA 92562
- (951) 694-8549
- Korean, Spanish
Effective as of 01-NOV-20

**GONZALES, EDIVINA, MD**
Provider ID: 100039220006
- 39755 DATE ST STE 103
- MURRIETA, CA 92563
- (951) 304-3221
- Spanish, Tagalog
Effective as of 01-SEP-10

**MARTINEZ, JORGE, MD**
Provider ID: 100096235010
- 39755 MURRIETA HOT SPRINGS RD STE E120
- MURRIETA, CA 92563
- (951) 461-1331
- Spanish
Effective as of 01-SEP-10

**GONZALES, PATRICK, MD**
Provider ID: 100039220007
- 39755 DATE ST STE 103
- MURRIETA, CA 92563
- (951) 304-3221
- Spanish
Effective as of 01-SEP-10

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

### INTERNAL MEDICINE

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

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

**REYNOLDS, RICHARD, MD**
Provider ID: 100023980003
- 36 N EUCLID AVE STE 105
- NATIONAL CITY, CA 91950
- (619) 255-2950
- Spanish, Tagalog
Effective as of 01-OCT-22

### FAMILY PRACTICE

**ALGHAMDI, ASMA, MD**
Provider ID: 100360059004
- 2400 E 8TH ST
- NATIONAL CITY, CA 91950
- (619) 662-4100
Effective as of 01-NOV-21

**ALVAREZ-ESTRADA, MIGUEL, MD**
Provider ID: 100096235003
- 39755 MURRIETA HOT SPRINGS RD STE E120
- MURRIETA, CA 92563
- (951) 461-1331
- Spanish
Effective as of 01-SEP-10

**MARTINEZ, JORGE, MD**
Provider ID: 100096235010
- 39755 MURRIETA HOT SPRINGS RD STE E120
- MURRIETA, CA 92563
- (951) 461-1331
Effective as of 01-FEB-24

**CAMPBELL, BRIANNA, MD**
Provider ID: 100096235003
- 39755 MURRIETA HOT SPRINGS RD STE E120
- MURRIETA, CA 92563
- (951) 461-1331
Effective as of 01-JAN-11

**CARLSON, ROBERT, MD**
Provider ID: 100096235003
- 39755 MURRIETA HOT SPRINGS RD STE E120
- MURRIETA, CA 92563
- (951) 461-1331
Effective as of 01-OCT-22

**CEVALLOS, JAMES, MD**
Provider ID: 100002398003
- 36 N EUCLID AVE STE 105
- NATIONAL CITY, CA 91950
- (619) 255-2950
- Spanish, Tagalog
Effective as of 01-SEP-22
C1. 網絡內提供者清單
初級保健提供者

<table>
<thead>
<tr>
<th>Provider ID</th>
<th>Address</th>
<th>Phone</th>
<th>Language</th>
<th>Effective as of</th>
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<tr>
<td>100163378003</td>
<td>1136 D AVE NATIONAL CITY, CA 91950</td>
<td>(619) 662-4100</td>
<td>Spanish</td>
<td>01-APR-23</td>
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<tr>
<td>100395889005</td>
<td>2835 HIGHLAND AVE NATIONAL CITY, CA 91950</td>
<td>(844) 200-2426</td>
<td>Spanish</td>
<td>01-FEB-24</td>
</tr>
<tr>
<td>100064070023</td>
<td>217 HIGHLAND AVE NATIONAL CITY, CA 91950</td>
<td>(619) 434-7308</td>
<td>Arabic, Armenian, Spanish Teleservice</td>
<td>01-NOV-21</td>
</tr>
<tr>
<td>100021162012</td>
<td>610 EUCLID AVE STE 302 NATIONAL CITY, CA 91950</td>
<td>(619) 527-7700</td>
<td>Spanish, Tagalog</td>
<td>01-NOV-20</td>
</tr>
<tr>
<td>100325216017</td>
<td>331 E 8TH ST NATIONAL CITY, CA 91950</td>
<td>(619) 662-4100</td>
<td>Spanish</td>
<td>01-APR-23</td>
</tr>
<tr>
<td>100325216018</td>
<td>332 E 8TH ST NATIONAL CITY, CA 91950</td>
<td>(619) 662-4100</td>
<td>Spanish</td>
<td>01-APR-23</td>
</tr>
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NATIONAL CITY, CA 91950
(619) 662-4100
Filipino, Spanish, Tagalog
Effective as of 01-JAN-14

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

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

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

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

ORTIZ ILIZALITURRI, ANA, MD
Provider ID: 100394347002
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
(619) 434-7308
Spanish
Teleservice
Effective as of 01-JUL-21

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

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

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

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

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

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

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

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

OPERATION SAMAHAN -
C1. 網絡內提供者清單
初級保健提供者

NATIONAL C, †
Provider ID: PG0084147004
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
(844) 200-2426
Effective as of 01-JAN-21

OPERATION SAMAHAN
GRANGER SCHOOL BASED,
Provider ID: PG0084288003
2101 GRANGER AVE
NATIONAL CITY, CA 91950
(844) 200-2426
Effective as of 01-JAN-21

SAN YSIDRO HEALTH
NATIONAL CITY,
Provider ID: PG0047542010
1136 D AVE
NATIONAL CITY, CA 91950
(619) 662-4100
Teleservice
Effective as of 01-JAN-21

SAN YSIDRO HEALTH
PARADISE HILLS, †
Provider ID: PG0047542011
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
(619) 662-4100
Teleservice
Effective as of 01-JAN-21

SAN YSIDRO HEALTH SOUTH BAY,
Provider ID: PG0077626003
330 E 8TH ST
NATIONAL CITY, CA 91950
(619) 662-4100
Teleservice
Effective as of 01-JAN-21

GENERAL PRACTICE

MEDINA, NATALIE, MD
Provider ID: 100254911004
502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
(619) 267-1168
 Spanish
Effective as of 01-MAR-18

MEDINA, NATALIE, MD
Provider ID: 100254911014
502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
(619) 267-1168
 Spanish
Effective as of 01-JAN-21

MEDINA, NATALIE, MD
Provider ID: 100254911015
502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
(619) 267-1168
 Spanish
Effective as of 01-MAR-21

MEDINA, NATALIE, MD
Provider ID: 100254911004
502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
(619) 267-1168
 Spanish
Effective as of 01-MAR-18

MEDINA, NATALIE, MD
Provider ID: 100254911014
502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
(619) 267-1168
 Spanish
Effective as of 01-JAN-21

MEDINA, NATALIE, MD
Provider ID: 100254911015
502 EUCLID AVE STE 306
NATIONAL CITY, CA 91950
(619) 267-1168
 Spanish
Effective as of 01-MAR-21

INTERNAL MEDICINE

BRAVERMAN, IRA, MD
Provider ID: 100012010018
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
(619) 267-8181
 Spanish, Tagalog
Effective as of 01-AUG-20

BRAVERMAN, IRA, MD
Provider ID: 100012010014
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
(619) 267-8181
 Spanish, Tagalog
Effective as of 01-APR-21

EL GHONEIMY, AHMED, MD
Provider ID: 100103500014
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
(619) 434-7308
 Arabic
Teleservice
Effective as of 01-AUG-22

HEKMAT, RAZI, MD
Provider ID: 100081732022
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
(619) 267-8181
 Spanish, Tagalog
Effective as of 01-NOV-20

CANTU-REYNA, GUILLERMO,
MD
Provider ID: 100214575010
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
(619) 434-7308
Teleservice
Effective as of 01-JUL-21

COMUNALE, RODERICK, MD
Provider ID: 100063923026
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
(858) 551-0276
 Spanish
Teleservice
Effective as of 01-NOV-23

DELA PAZ, LENNIE, MD
Provider ID: 100007688007
610 EUCLID AVE STE 303
NATIONAL CITY, CA 91950
(619) 475-3600
 Spanish, Tagalog
Effective as of 01-JAN-21

Your PCP’s provider network may have network-based mental health providers. Please refer to the list below. You may contact these providers directly. Please note, some services may require prior authorization from the mental health provider and the service will be covered.

For online access to mental health provider lists, please visit blueshieldca.com/fad.
Your PCP’s provider group may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, certain services may require authorization from a mental health service provider through Blue Shield, after which the service can be covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.

C1. 網絡內提供者清單

初級保健提供者

HEKMAT, RAZI, MD†
Provider ID: 100081732019
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
(619) 267-8181
Effective as of 01-APR-21

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

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

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

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

PRATHIPATI, LAKSHMI, MD††
Provider ID: 100041945034
502 EUCLID AVE STE 2013
NATIONAL CITY, CA 91950
(619) 267-0553
Spanish, Tagalog
Effective as of 01-JAN-21

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

TANGCO, IRINEO, MD††
Provider ID: 100107246016
2340 E 8TH ST STE J
NATIONAL CITY, CA 91950
(619) 479-0320
Spanish, Tagalog
Effective as of 01-SEP-22

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

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

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

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

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

FAMILY PRACTICE

GREENBERG, CATOU, MD*†
Provider ID: 100072487005
1441 AVOCADO AVE STE 503
NEWPORT BEACH, CA 92660
(949) 718-9020
Effective as of 01-JAN-21
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<td>818 PIER VIEW WAY, OCEANSIDE, CA 92054</td>
<td>(760) 631-5000</td>
<td>Spanish</td>
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<td>VIDAL, MONICA, DO</td>
<td>Provider</td>
<td>818 PIER VIEW WAY, OCEANSIDE, CA 92054</td>
<td>(844) 308-5003</td>
<td>Spanish</td>
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<td>PONSFORD, DIANA, DO</td>
<td>Provider</td>
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<td>(760) 631-5000</td>
<td>Spanish</td>
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<td>SAFI, ROOZCHEHR, MD</td>
<td>Provider</td>
<td>605 CROUCH ST, OCEANSIDE, CA 92054</td>
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<td>VISTA COMMUNITY CLINIC</td>
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<td>818 PIER VIEW WAY, OCEANSIDE, CA 92054</td>
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*Spanish Effective as of 01-JAN-24

*Farsi Effective as of 01-APR-14

*Korean Effective as of 01-FEB-23

*Teleservice Effective as of 01-JUL-22

*Farsi Effective as of 01-Dec-10
### C1. 網絡內提供者清單

#### 初級保健提供者

<table>
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<th>Provider Name</th>
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<td>818 PIER VIEW WAY, OCEANSIDE, CA 92054</td>
<td>(760) 631-5000</td>
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62
C1. 網絡內提供者清單

### 初級保健提供者

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### FQHC

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### INTERNAL MEDICINE

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### FAMILY PRACTICE

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### INTERNAL MEDICINE

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### GENERAL PRACTICE

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<td>(949) 709-0988</td>
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Your PCP's healthcare group may have its own network of mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, certain services may require prior authorization from a mental health service provider to be covered by Blue Shield.

To view a list of mental health service providers online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單
初級保健提供者

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

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

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

FAMILY PRACTICE

DE SILVA, PETER, MD‡
Provider ID: 100046594003
29809 SANTA MARGARITA PKWY STE 300
RANCHO SANTA MARG, CA 92688
(949) 709-5100
Effective as of 01-JAN-18

ALI, MOHAMMED, MD††
Provider ID: 100114282008
665 CAMINO DE LOS MARES STE 203
SAN CLEMENTE, CA 92673
(949) 493-9344
Hindi, Telugu, Urdu
Effective as of 01-DEC-18

ALI, MOHAMMED, MD††
Provider ID: 100114282008
665 CAMINO DE LOS MARES STE 203
SAN CLEMENTE, CA 92673
(949) 493-9344
Hindi, Telugu, Urdu
Effective as of 01-DEC-18

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

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

INTERNAL MEDICINE

CHANG, LAWRENCE, MD‡
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<td>MITREVSKI, PREDRAG, MD</td>
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<td>(949) 542-8865</td>
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<td>(619) 810-7027</td>
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<td>(858) 270-5454</td>
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C1. 網絡內提供者清單
初級保健提供者

 DAO, VIET, MD
Provider ID: 100105020023
2363 ULRIC ST STE B
SAN DIEGO, CA 92111
(858) 268-1747
Mandarin, Spanish, Vietnamese
Effective as of 01-MAY-14

 DAO, VIET, MD
Provider ID: 100105020062
2363 ULRIC ST STE B
SAN DIEGO, CA 92111
(858) 268-1747
Mandarin, Spanish, Vietnamese
Effective as of 01-AUG-20

 DAO, VIET, MD
Provider ID: 100105020027
2363 ULRIC ST STE B
SAN DIEGO, CA 92111
(858) 268-1747
Mandarin, Spanish, Vietnamese
Effective as of 01-APR-15

 DAO, VIET, MD
Provider ID: 100105020066
2363 ULRIC ST STE B
SAN DIEGO, CA 92111
(858) 268-1747
Mandarin, Spanish, Vietnamese
Effective as of 01-JAN-21

 DAO, VIET, MD
Provider ID: 100105020069
4616 EL CAJON BLVD STE 9
SAN DIEGO, CA 92115
(619) 583-0553
Mandarin, Spanish, Vietnamese
Effective as of 01-AUG-21

 DE ROTH, GEORGINE, MD
Provider ID: 100409222005
3750 CONVOY ST STE 118
SAN DIEGO, CA 92111
(760) 741-1224
French, Hungarian, Spanish
Effective as of 01-AUG-23

 DENYSIAK, JACQUELINE, MD
Provider ID: 100363725002
3969 4TH AVE STE 203
SAN DIEGO, CA 92103
(619) 294-6500
Teleservice
Effective as of 01-DEC-20

 DENYSIAK, JACQUELINE, MD
Provider ID: 100363725005
3969 4TH AVE STE 203
SAN DIEGO, CA 92103
(619) 294-6500
Teleservice
Effective as of 01-JAN-21

 DENYSIAK, JACQUELINE, MD
Provider ID: 100363725007
3969 4TH AVE STE 203
SAN DIEGO, CA 92103
(619) 294-6500
Teleservice
Effective as of 01-OCT-17

 DESHPANDE, KAVITA, MD
Provider ID: 100427408003
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 255-9155
French
Teleservice
Effective as of 01-APR-24

66
C1. 網絡內提供者清單
初級保健提供者

DESHPANDE, KAVITA, MD
Provider ID: 100427408004
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 269-1269
French
Teleservice
Effective as of 01-APR-24

DIEP, BRIAN, MD
Provider ID: 100324529011
7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
(858) 277-5463
Vietnamese
Teleservice
Effective as of 01-JUN-22

DIEP, BRIAN, MD
Provider ID: 100324529013
4551 EL CAJON BLVD
SAN DIEGO, CA 92115
(619) 280-7185
Vietnamese
Teleservice
Effective as of 01-OCT-22

DRZYMALSKI, MONIKA, DO
Provider ID: 100390753005
3180 UNIVERSITY AVE STE 120
SAN DIEGO, CA 92104
(858) 529-7229
Teleservice
Effective as of 01-JAN-21

DRZYMALSKI, MONIKA, DO
Provider ID: 100390753002
3180 UNIVERSITY AVE STE 120
SAN DIEGO, CA 92104
(858) 529-7229
Teleservice
Effective as of 01-OCT-22

DUDAREWICZ, TERESA, MD
Provider ID: 100068264016
9909 MIRA MESA BLVD
STE 110
SAN DIEGO, CA 92131
(858) 788-7208
French, Polish, Russian
Teleservice
Effective as of 01-OCT-22

FAMBRO, CYNTHIA, MD
Provider ID: 100350838004
950 S EUCLID AVE
SAN DIEGO, CA 92114
(619) 662-4100
Spanish
Teleservice
Effective as of 01-OCT-22

GIL, GABRIEL, MD
Provider ID: 100094547025
909 CARDIFF ST
SAN DIEGO, CA 92114
(619) 465-3121
Spanish
Teleservice
Effective as of 01-OCT-22
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<td>GIL, GABRIEL, MD†</td>
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<td>100094547026</td>
<td>903 CARDIFF ST</td>
<td>(619) 465-3121</td>
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<td>01-NOV-20</td>
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<tr>
<td>GUTIERREZ, LORAINE, MD†</td>
<td>F</td>
<td>100334279007</td>
<td>4060 FAIRMOUNT AVE</td>
<td>(619) 255-9155</td>
<td>Teleservice</td>
<td>01-AUG-21</td>
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<tr>
<td>HAMIDI, MAHSHID, MD†</td>
<td>F</td>
<td>100110351017</td>
<td>5222 BALBOA AVE STE 31</td>
<td>(858) 565-6394</td>
<td>Faroese, Farsi, French</td>
<td>01-APR-23</td>
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<tr>
<td>HAMIDI, MAHSHID, MD†</td>
<td>F</td>
<td>100110351013</td>
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<td>(619) 662-4100</td>
<td>Spanish</td>
<td>01-APR-23</td>
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<td>HAMIDI, MAHSHID, MD†</td>
<td>F</td>
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<td>5222 BALBOA AVE STE 31</td>
<td>(858) 565-6394</td>
<td>Faroese, Farsi, French</td>
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<tr>
<td>HAMIDI, MAHSHID, MD†</td>
<td>F</td>
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<tr>
<td>HEIMLER, GRAHAM, MD*</td>
<td>M</td>
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<td>9333 GENESEE AVE</td>
<td>(800) 926-8273</td>
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<tr>
<td>HEINRICI, ALEKA, MD†</td>
<td>F</td>
<td>100244401008</td>
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<tr>
<td>HENRY, REBECCA, MD*</td>
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<td>(619) 662-4100</td>
<td>Arabic, Spanish</td>
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<tr>
<td>KAUFHOLD, ANNE, MD†</td>
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<td>KIDDER, BRENDAN, MD*</td>
<td>M</td>
<td>100034556005</td>
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<tr>
<td>KUNIN-RIDA, TERI, MD†</td>
<td>F</td>
<td>100064070025</td>
<td>1032 BROADWAY</td>
<td>(619) 795-5991</td>
<td>Arabic, Armenian, Spanish</td>
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<tr>
<td>Houghton, Robert, MD*</td>
<td>M</td>
<td>100034977002</td>
<td>1855 1ST AVE STE 200B</td>
<td>(619) 233-4044</td>
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<tr>
<td>JENKIN, FREDERICK, DO†</td>
<td>M</td>
<td>100038612009</td>
<td>3562 GOVERNOR DR STE 1</td>
<td>(619) 774-5157</td>
<td>Spanish</td>
<td>01-MAY-21</td>
</tr>
<tr>
<td>JOHN, TANNER, MD*</td>
<td>M</td>
<td>100415495003</td>
<td>3177 OCEAN VIEW BLVD</td>
<td>(619) 662-4100</td>
<td>Teleservice</td>
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</tbody>
</table>

*C1. 網絡內提供者清單
初級保健提供者

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad*
C1. 網絡內提供者清單

初級保健提供者

KUNIN-RIDA, TERI, MD†
Provider ID: 100064070020
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 255-9155
Arabic, Armenian, Spanish
Teleservice
Effective as of 01-NOV-21

KUNIN-RIDA, TERI, MD†
Provider ID: 100064070026
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 269-1269
Arabic, Armenian, Spanish
Teleservice
Effective as of 01-NOV-21

LEBANO, RICHARD, MD
Provider ID: 100340129005
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
(844) 200-2426
Spanish
Effective as of 01-OCT-23

LIU, CHIA-LIN, DO
Provider ID: 100102354002
2185 GARNET AVE
SAN DIEGO, CA 92109
(858) 270-9270
Chinese, Mandarin, Spanish
Effective as of 01-DEC-03

LIU, CHIA-LIN, DO
Provider ID: 100102354004
2185 GARNET AVE
SAN DIEGO, CA 92109
(858) 270-9270
Chinese, Mandarin, Spanish
Effective as of 01-APR-23

LUAN, GORDON, MD†
Provider ID: 100012685016
4320 GENESEE AVE STE 103
SAN DIEGO, CA 92117
(858) 598-6789
Chinese, Mandarin
Effective as of 01-JUN-22

LUAN, GORDON, MD†
Provider ID: 100012685018
4320 GENESEE AVE STE 103
SAN DIEGO, CA 92117
(858) 598-6789
Chinese, Mandarin
Effective as of 01-NOV-23

MARCÉZ, LUIS, MD†
Provider ID: 100078829006
4060 4TH AVE STE 540
SAN DIEGO, CA 92103
(619) 236-8796
Italian, Spanish
Effective as of 01-NOV-21

MATSON, GARY, DO†
Provider ID: 100051901002
4501 MISSION BAY DR STE 3E
SAN DIEGO, CA 92109
(858) 270-4343
French, Spanish
Effective as of 01-FEB-07

MONTENEGRO, CLAUDIA, DO†
Provider ID: 100427447004
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 269-1269
Teleservice
Effective as of 01-APR-24

MONTENEGRO, CLAUDIA, DO†
Provider ID: 100427447003
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 255-9155
Teleservice
Effective as of 01-APR-24

MORALES, ALEJANDRA, MD†
Provider ID: 100363732006
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
(619) 662-4100
Effective as of 01-MAY-22

MORALES, ALEJANDRA, MD†
Provider ID: 100363732003
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
(619) 662-4100
Effective as of 01-JAN-21

NGUYEN, LINHKIEU, MD†
Provider ID: 100073181012
3575 EUCLID AVE STE 100
SAN DIEGO, CA 92105
(619) 284-1400
Chinese, Spanish, Tagalog
Effective as of 01-FEB-07

NGUYEN, HUONG, MD†
Provider ID: 100104992018
4444 EL CAJON BLVD STE 6
SAN DIEGO, CA 92115
(619) 285-1522
Cambodian, Cantonese, Mandarin
Effective as of 01-APR-23

NGUYEN, HUONG, MD†
Provider ID: 100104992004
4444 EL CAJON BLVD STE 6
SAN DIEGO, CA 92115
(619) 285-1522
Cambodian, Cantonese, Mandarin
Effective as of 01-APR-23
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<td>NGUYEN, LINHKIEU, MD</td>
<td>100073181014</td>
<td>6905 LINDA VISTA RD SAN DIEGO, CA 92111</td>
<td>(619) 284-1400</td>
<td>Chinese, Spanish, Tagalog</td>
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<td>ORTIZ ILIZALITURRI, ANA, MD</td>
<td>100394347011</td>
<td>4060 FAIRMOUNT AVE SAN DIEGO, CA 92105</td>
<td>(619) 280-4213</td>
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<td>RECALDE, FRANCISCO, MD</td>
<td>100015266018</td>
<td>3811 EL CAJON BLVD SAN DIEGO, CA 92105</td>
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<td>RECALDE, FRANCISCO, MD</td>
<td>100015266003</td>
<td>3811 EL CAJON BLVD SAN DIEGO, CA 92105</td>
<td>(619) 284-5622</td>
<td>Spanish</td>
<td>Effective as of 01-SEP-09</td>
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<td>SOWER, STEVEN, DO</td>
<td>100332302002</td>
<td>950 S EUCLID AVE SAN DIEGO, CA 92114</td>
<td>(619) 662-4100</td>
<td>Spanish</td>
<td>Effective as of 01-AUG-18</td>
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<td>RODRIGUEZ, SEAN, MD</td>
<td>100197884009</td>
<td>3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113</td>
<td>(619) 662-4100</td>
<td>Spanish</td>
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<td>SALEH, ANDREW, MD</td>
<td>100293587004</td>
<td>1370 ROSECRANS ST STE A SAN DIEGO, CA 92106</td>
<td>(619) 223-2668</td>
<td>Spanish</td>
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<td>SAZEGAR, PAYAM, MD</td>
<td>100187888011</td>
<td>4060 FAIRMOUNT AVE SAN DIEGO, CA 92105</td>
<td>(619) 255-9155</td>
<td>Spanish</td>
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<td>SCOTT, LAGINA, MD</td>
<td>100363586003</td>
<td>292 EUCLID AVE STE 210 SAN DIEGO, CA 92114</td>
<td>(619) 662-4100</td>
<td>Spanish</td>
<td>Effective as of 01-MAR-21</td>
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<td>SHAMANI, AZAM, MD</td>
<td>100132296023</td>
<td>5555 RESERVOIR DR STE 312 SAN DIEGO, CA 92120</td>
<td>(619) 639-7285</td>
<td>Faroese, Farsi, Spanish</td>
<td>Effective as of 01-SEP-21</td>
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<td>SHAMANI, AZAM, MD</td>
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<td>(619) 662-4100</td>
<td>Spanish</td>
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<td>SHAMANI, AZAM, MD</td>
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<td>3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113</td>
<td>(619) 662-4100</td>
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<td>SIVA, TENAYA, MD</td>
<td>100418703003</td>
<td>5555 RESERVOIR DR STE 312 SAN DIEGO, CA 92120</td>
<td>(619) 639-7285</td>
<td>Faroese, Farsi, Spanish</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
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<td>Stones, Rachel, MD†</td>
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<td>Stones, Rachel, MD†</td>
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<td>(619) 255-9155</td>
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<td>Szmidt, Maria, MD†</td>
<td>12395 El Camino Real</td>
<td>(858) 259-5655</td>
<td>Polish, Russian, Spanish</td>
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<td>Szmidt, Maria, MD†</td>
<td>12395 El Camino Real</td>
<td>(858) 259-5655</td>
<td>Polish, Russian, Spanish</td>
<td>01-JAN-21</td>
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<tr>
<td>Vail, Maria, MD†</td>
<td>655 Saturn Blvd Ste J</td>
<td>(619) 575-4442</td>
<td>Spanish, Tagalog</td>
<td>01-FEB-18</td>
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<td>Vail, Maria, MD†</td>
<td>9800 Glen Center Dr</td>
<td>(858) 832-2500</td>
<td>Spanish, Vietnamese</td>
<td>01-NOV-23</td>
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<td>Vail, Maria, MD†</td>
<td>444 W C St Ste 185</td>
<td>(619) 232-6262</td>
<td>Chinese, Spanish</td>
<td>01-JUN-11</td>
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<tr>
<td>Yuen, Selene, MD†</td>
<td>4320 Genesee Ave Ste 103</td>
<td>(858) 598-6789</td>
<td>Chinese</td>
<td>01-APR-22</td>
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C1. 網絡內提供者清單
初級保健提供者

YUEN, SELENE, MD†
Provider ID: 100246155015
4320 GENESEE AVE STE 103
SAN DIEGO, CA 92117
(858) 598-6789
Chinese
Teleservice
Effective as of 01-JUN-22

ZINK, IRENE, MD†‡
Provider ID: 100324255002
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
(619) 662-4100
German
Teleservice
Effective as of 01-AUG-17

ZINK, IRENE, MD†‡
Provider ID: 100324255006
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
(619) 662-4100
German
Teleservice
Effective as of 01-APR-23

FQHC

DIAMOND NEIGHBORHOODS
FAMILY HLTH CTRS INC,
Provider ID: PG0025044041
4725 MARKET ST
SAN DIEGO, CA 92102
(619) 515-2560
Effective as of 01-JAN-21

DOWNTOWN FAMILY CTR AT
CONNECTIONS, †
Provider ID: PG0084437004
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
(619) 515-2430
Effective as of 01-JAN-21

FAMILY HEALTH CTR IBARRA,
†
Provider ID: PG0084517004
4874 POLK AVE
SAN DIEGO, CA 92105
(619) 515-2426
Effective as of 01-JAN-21

FAMILY HEALTH CTR OF SD-
ELM ST, †
Provider ID: PG0083911003
140 ELM ST
SAN DIEGO, CA 92101
(619) 515-2520
Effective as of 01-JAN-21

FAMILY HEALTH CTR SAN
DIEGO-OAK PARK,
Provider ID: PG0084522003
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
(619) 515-2454
Effective as of 01-JAN-21

FAMILY HEALTH CTR OF SD
DIEGO COMMERCIAL,
Provider ID: PG0083950003
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
(619) 515-2422
Effective as of 01-JAN-21

FAMILY HEALTH CTR SAN
DIEGO-CITY COLLEGE,
Provider ID: PG0085338003
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
(619) 515-2525
Effective as of 01-JAN-21

FAMILY HLTH CTR SAN
DIEGO-BEACH AREA,
Provider ID: PG0083156003
3705 MISSION BLVD
SAN DIEGO, CA 92109
(619) 515-2444
Effective as of 01-JAN-21

FAMILY HLTH CTR SD
HILLCREST, †
Provider ID: PG0084516014
4094 4TH AVE
SAN DIEGO, CA 92103
(619) 515-2545
Effective as of 01-JAN-21

KING CHAVEZ HEALTH
CENTER, †
Provider ID: PG0047560014
950 S EUCLID AVE
SAN DIEGO, CA 92114
(619) 662-4100
Teleservice
Effective as of 01-JAN-21

LA MAESTRA FAMILY CLINIC
INC, †
Provider ID: PG0053396003
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
(619) 280-4213
Teleservice
Effective as of 01-JAN-21

LINDA VISTA HEALTH CARE
CTR,
Provider ID: PG0024858005

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C1. 網絡內提供者清單
初級保健提供者

- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
  💬 (858) 279-0925
  Teleservice
  Effective as of 01-JUL-22

- LOGAN HEIGHTS FAMILY HEALTH CENTER,
  Provider ID: PG0025044044
  💬 2204 NATIONAL AVE
  SAN DIEGO, CA 92113
  💬 (619) 515-2355
  Effective as of 01-JAN-21

- LOGAN HEIGHTS FAMILY HEALTH CENTER,
  Provider ID: PG0025044036
  💬 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
  💬 (619) 515-2300
  Effective as of 01-JAN-21

- MID-CITY COMMUNITY CLINIC,
  Provider ID: PG0049261010
  💬 4290 POLK AVE
  SAN DIEGO, CA 92105
  💬 (619) 563-0250
  Teleservice
  Effective as of 01-JUL-22

- MID-CITY COMMUNITY CLINIC,
  Provider ID: PG0049261008
  💬 4305 UNIVERSITY AVE STE 150
  SAN DIEGO, CA 92105
  💬 (619) 280-2058
  Effective as of 01-JUL-22

- NESTOR COMMUNITY HEALTH CENTER,
  Provider ID: PG0031643004
  💬 1016 OUTER RD
  SAN DIEGO, CA 92154
  💬 (619) 429-3733
  Teleservice
  Effective as of 01-JUL-22

- NORTH PARK FAMILY HEALTH CENTERS,
  Provider ID: PG0084186003
  💬 3514 30TH ST
  SAN DIEGO, CA 92104
  💬 (619) 515-2424
  Effective as of 01-JAN-21

- NORTH PARK FAMILY HEALTH CENTERS,
  Provider ID: PG0025044037
  💬 3544 30TH ST
  SAN DIEGO, CA 92104
  💬 (619) 515-2424
  Effective as of 01-JAN-21

- OPERATION SAMAHAN - MIRA MESA, †
  Provider ID: PG0083606005
  💬 10737 CAMINO RUIZ STE 235
  SAN DIEGO, CA 92126
  💬 (844) 200-2426
  Effective as of 01-JAN-21

- OPERATION SAMAHAN - MIRA MESA,
  Provider ID: PG0083606006
  💬 9855 ERMA RD STE 105
  SAN DIEGO, CA 92131
  💬 (844) 200-2426
  Effective as of 01-JAN-21

- OPERATION SAMAHAN RANCHO PENASQUITOS,
  Provider ID: PG0083903005
  💬 9995 CARMEL MOUNTAIN RD STE B10 AND B11
  SAN DIEGO, CA 92129
  💬 (844) 200-2426
  Effective as of 01-JUL-22

- SAN DIEGO AMERICAN INDIAN HEALTH CENTER,
  Provider ID: PG0025869017
  💬 2630 1ST AVE
  SAN DIEGO, CA 92103
  💬 (619) 234-2158
  Teleservice
  Effective as of 01-JUL-22

- SAN DIEGO FAMILY CARE,
  Provider ID: PG0092672004
  💬 7011 LINDA VISTA RD
  SAN DIEGO, CA 92111
  💬 (858) 810-8700
  Teleservice
  Effective as of 01-JUL-22

- SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,
  Provider ID: PG0094135003
  💬 316 25TH ST
  SAN DIEGO, CA 92102
  💬 (619) 238-5551
  Effective as of 01-JAN-21

- SAN YSIDRO HEALTH CHC - OCEAN VIEW, †
  Provider ID: PG0047560013
  💬 3177 OCEAN VIEW BLVD
  SAN DIEGO, CA 92113
  💬 (619) 662-4100
  Teleservice
  Effective as of 01-JAN-21

- SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,
  Provider ID: PG0094138003
  💬 4690 EL CAJON BLVD
  SAN DIEGO, CA 92115
  💬 (619) 662-4100
  Effective as of 01-JAN-21
C1. 網絡內提供者清單
初級保健提供者

Teleservice
Effective as of 01-JAN-21

SAN YSIDRO HEALTH
PRECISION PARK,
Provider ID: PG0128177002
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
(619) 662-4100
Effective as of 01-APR-24

SHERMAN HEIGHTS FAMILY
HLTH CTRS INC,
Provider ID: PG0082766003
2391 ISLAND AVE
SAN DIEGO, CA 92102
(619) 515-2435
Effective as of 01-JAN-21

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER, *
Provider ID: PG0086361006
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
(619) 233-8500
Teleservice
Effective as of 01-JUL-22

GENERAL PRACTICE

BORRERO, MARCOS, MD mt
Provider ID: 100104392016
3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Spanish
Teleservice
Effective as of 01-NOV-20

BORRERO, MARCOS, MD mt
Provider ID: 100104392005
3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Spanish
Teleservice
Effective as of 01-MAY-18

BORRERO, MARCOS, MD mt
Provider ID: 100104392018
3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Spanish
Teleservice
Effective as of 01-DEC-21

BORRERO, MARCOS, MD mt
Provider ID: 100104392015
3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Spanish
Teleservice
Effective as of 01-JAN-21

BORRERO, MARCOS, MD mt
Provider ID: 100104392019
3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Spanish
Teleservice
Effective as of 01-JUN-23

DABROWSKI, THOMAS, MD m
Provider ID: 100343180011
3900 5TH AVE STE 110
SAN DIEGO, CA 92103
(858) 554-1212
Spanish
Effective as of 01-DEC-23

DENYSIAK, JACQUELINE, MD ft
Provider ID: 100363725006
3969 4TH AVE STE 203
SAN DIEGO, CA 92101
(858) 277-9669
Japanese
Effective as of 01-NOV-20

KIDOKORO, YASUKO, MD ft
Provider ID: 100075657015
5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
(858) 277-9669
Japanese
Effective as of 01-JUN-23

KIDOKORO, YASUKO, MD ft
Provider ID: 100075657010
5222 BALBOA AVE STE 31
SAN DIEGO, CA 92117
(858) 277-9669
Japanese
Effective as of 01-MAY-22

MIRKARIMI, MORTEZA, MD mt
Provider ID: 100084653010

GERBATSCH-BORNEMISZA,
ILDIKO, MD ft
Provider ID: 100325246016
3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Teleservice
Effective as of 01-JUL-23

GUEFEN, URI, MD m
Provider ID: 100363725006
3969 4TH AVE STE 203
SAN DIEGO, CA 92103
(619) 294-6500
Teleservice
Effective as of 01-JAN-21
C1. 網絡內提供者清單

初級保健提供者

- **MIRKARIMI, MORTEZA, MD**
  - Provider ID: 100084653003
  - 3863 CLAIREMONT DR
  - SAN DIEGO, CA 92117
  - (858) 483-5570
  - Faroese, Farsi, Spanish
  - Effective as of 01-JAN-21

- **MIRKARIMI, MORTEZA, MD**
  - Provider ID: 100084653009
  - 3863 CLAIREMONT DR
  - SAN DIEGO, CA 92117
  - (858) 483-5570
  - Faroese, Farsi, Spanish
  - Effective as of 01-DEC-12

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

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

- **RECALDE, FRANCISCO, MD**
  - Provider ID: 100015266017
  - 3811 EL CAJON BLVD
  - SAN DIEGO, CA 92105
  - (619) 284-5622
  - Spanish
  - Effective as of 01-AUG-20

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

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

- **AL-SALEH, YADANI, MD**
  - Provider ID: 100358544019
  - 3737 MORAGA AVE STE B103
  - SAN DIEGO, CA 92117
  - (858) 799-0855
  - Spanish
  - Effective as of 01-DEC-22

- **AL-SALEH, YADANI, MD**
  - Provider ID: 100358544012
  - 3737 MORAGA AVE STE B103
  - SAN DIEGO, CA 92117
  - (858) 799-0855
  - Spanish
  - Effective as of 01-JAN-21

- **AL-SALEH, YADANI, MD**
  - Provider ID: 100358544019
  - 3737 MORAGA AVE STE B103
  - SAN DIEGO, CA 92117
  - (858) 799-0855
  - Spanish
  - Effective as of 01-MAR-18

- **AL-SALEH, YADANI, MD**
  - Provider ID: 100358544012
  - 3737 MORAGA AVE STE B103
  - SAN DIEGO, CA 92117
  - (858) 799-0855
  - Spanish
  - Effective as of 01-JAN-21

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

- **DE CARVALHO, CARLOS, MD**
  - Provider ID: 10007227047
  - 2939 BEYER BLVD
  - SAN DIEGO, CA 92154
  - (619) 423-0343
  - Portuguese, Spanish, Tagalog
  - Teleservice
  - Effective as of 01-JAN-21

- **DE CARVALHO, CARLOS, MD**
  - Provider ID: 10007227048
  - 2939 BEYER BLVD
  - SAN DIEGO, CA 92154
  - (619) 423-0343
  - Portuguese, Spanish,
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<td>4060 4TH AVE STE 100</td>
<td>(619) 718-9444</td>
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Your PCP’s doctor group may have a network of mental health service providers. Please refer to the list below. You may contact these providers directly. Please note, some services may require prior authorization from your mental health service provider before being covered by Blue Shield.

For online access to the mental health service provider list, please visit blueshieldca.com/fad.
### C1. 網絡內提供者清單

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<thead>
<tr>
<th>姓名</th>
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<th>電話</th>
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<td>(858) 483-1720</td>
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<td>(858) 430-6656</td>
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<td>GUHAROY, ASIM, MD</td>
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<td>HUYNH, ANDREW, MD</td>
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<td>KHEHAR, BHUPINDER, MD</td>
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<td>100063083007</td>
<td>(619) 256-1200</td>
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<td>KURUVADI, NISHA, DO</td>
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<td>(619) 267-0553</td>
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*者。請注意，某些服務可能需要精神健康服務提供者獲得的事先授權，然後該服務才能獲得承保。Blue Shield

您的PCP
Effective as of 01-APR-24

MOSSON, MARK, MD
Provider ID: 100176768003
4060 4TH AVE STE 505
SAN DIEGO, CA 92103
(619) 298-1318
Effective as of 01-AUG-13

NAJAR, FAUZI, MD
Provider ID: 100390568002
3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Arabic
Effective as of 01-JUN-23

NAJAR, FAUZI, MD
Provider ID: 100390568003
3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Arabic
Effective as of 01-DEC-22

NAJAR, FAUZI, MD
Provider ID: 100390568007
3490 PALM AVE
SAN DIEGO, CA 92154
(619) 423-5616
Arabic
Effective as of 01-OCT-23

NGUYEN, NGOCBICH, MD
Provider ID: 100084488006
3969 4TH AVE STE 207
SAN DIEGO, CA 92103
(619) 543-0042
Vietnamese
Effective as of 01-FEB-17

O’ROURKE, COURTNEY, DO
Provider ID: 100152413026
9909 MIRA MESA BLVD
STE 110
SAN DIEGO, CA 92131
(858) 554-1212
Spanish
Effective as of 01-APR-24

OLIVER, DEANNA, MD
Provider ID: 100328564035
250 MARKET ST
SAN DIEGO, CA 92102
(619) 264-1935
Arabic
Effective as of 01-SEP-22

QUINONEZ, JOSE, MD
Provider ID: 100085905004
250 MARKET ST
SAN DIEGO, CA 92101
(619) 239-9675
Spanish
Effective as of 01-FEB-07

RAMINENI, NEELAKANTAN, MD
Provider ID: 100051318002
4537 COLLEGE AVE
SAN DIEGO, CA 92115
(619) 265-0504
Spanish, Telugu
Effective as of 01-NOV-18

RIADH, MAYSAM, MD
Provider ID: 100413125002
3260 3RD AVE
SAN DIEGO, CA 92103
(619) 297-3737
Arabic
Effective as of 01-SEP-23

SHAJAN, JOSHAN, MD
Provider ID: 100422554002
3863 CLAIREMONT DR
SAN DIEGO, CA 92117
(858) 483-5570
Spanish
Effective as of 01-FEB-24

SHI, RONG, MD
Provider ID: 100133432007
3260 3RD AVE
SAN DIEGO, CA 92103
(619) 297-3737
Mandarin
Effective as of 01-AUG-15

SPECKART, PAUL, MD
Provider ID: 100053933006
3260 3RD AVE
SAN DIEGO, CA 92103
(619) 297-3737
Effective as of 01-FEB-07

SZMIDT, MARIA, MD
Provider ID: 100108398006
12395 EL CAMINO REAL
STE 100
SAN DIEGO, CA 92130
(858) 259-5655
Polish, Russian, Spanish
Effective as of 01-JUL-04

TESSIER, ADLA, MD
Provider ID: 100077390010

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Your PCP’s provider network may have its own mental health services providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from your mental health services provider to be covered.

For online access to the mental health services provider list, please visit blueshieldca.com/fad.
<table>
<thead>
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<td>VILLA, MARIA, MD</td>
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<td>292 EUCLID AVE STE 210</td>
<td>(619) 662-4100</td>
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<td>3060 4TH AVE STE 505</td>
<td>(619) 298-1318</td>
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<td>30448 RANCHO VIEJO RD STE 150</td>
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<td>PANDY, LIZANDER, DO&lt;sup&gt;mt&lt;/sup&gt;</td>
<td>31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675</td>
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<td>Spanish</td>
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<tr>
<td>ZHENG, VINCENT, DO&lt;sup&gt;mt&lt;/sup&gt;</td>
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<tr>
<td>SERNA, SANDY, MD&lt;sup&gt;‡&lt;/sup&gt;</td>
<td>31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675</td>
<td>(949) 661-9600</td>
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<tr>
<td>TRINH, MIMI, MD&lt;sup&gt;‡&lt;/sup&gt;</td>
<td>31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675</td>
<td>(949) 661-9600</td>
<td>Vietnamese</td>
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</tr>
<tr>
<td>NATH, DEVARSHI, MD&lt;sup&gt;m&lt;/sup&gt;</td>
<td>150 VALPREDRA RD SAN MARCOS, CA 92069</td>
<td>(760) 736-6767</td>
<td>Bengali</td>
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<tr>
<td>WILLIE, KADEN, DO&lt;sup&gt;m&lt;/sup&gt;</td>
<td>150 VALPREDRA RD SAN MARCOS, CA 92069</td>
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<td>Portuguese</td>
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<tr>
<td>FORTMANN, DANIEL, MD&lt;sup&gt;‡&lt;/sup&gt;</td>
<td>32281 CAMINO CPSTRN C102 SAN JUAN CAPISTRANO, CA 92675</td>
<td>(949) 493-7981</td>
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<td>NGUYEN, THUYTRANG, MD&lt;sup&gt;‡&lt;/sup&gt;</td>
<td>30300 CAMINO CAPISTRANO SAN JUAN CAPISTRANO, CA 92675</td>
<td>(949) 240-2272</td>
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<tr>
<td>HALIM, NEIL, MD&lt;sup&gt;m&lt;/sup&gt;</td>
<td>1030 LA BONITA DR STE 316 SAN MARCOS, CA 92078</td>
<td>(760) 744-9626</td>
<td>Arabic, Spanish</td>
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** INTERNAL MEDICINE**

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<td>(760) 736-6767</td>
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** FQHC **

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** FAMILY PRACTICE **

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** INTERNAL MEDICINE **

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<td>(760) 736-6767</td>
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</table>
C1. 網絡內提供者清單
初級保健提供者

- WITCZAK, IZABELA, MD
  Provider ID: 100036527006
  150 VALPREDA RD
  SAN MARCOS, CA 92069
  (760) 736-6767
  Spanish
  Effective as of 01-OCT-14

- ARRIETA, NOEMI, DO
  Provider ID: 100214881011
  4004 BEYER BLVD
  SAN YSIDRO, CA 92173
  (619) 662-4100
  Spanish
  Effective as of 01-JAN-21

- CARRIEDO CENICEROS, MARIA, MD
  Provider ID: 100066452012
  3364 BEYER BLVD
  SAN YSIDRO, CA 92173
  (619) 662-4100
  Spanish
  Effective as of 01-JAN-21

- ALGHAMDI, ASMA, MD
  Provider ID: 100359014004
  3364 BEYER BLVD
  SAN YSIDRO, CA 92173
  (619) 662-4100
  Effective as of 01-AUG-22

- CUTLER, MICHAEL, MD
  Provider ID: 100225708022
  4630 BORDER VILLAGE RD
  STE H
  SAN YSIDRO, CA 92173
  (619) 264-2591
  Russian, Spanish
  Effective as of 01-JAN-21

- HERNANDEZ, RALPH, MD
  Provider ID: 100080408021
  1666 PRECISION PARK LN
  SAN YSIDRO, CA 92173
  (619) 662-4100
  Spanish
  Effective as of 01-JAN-21

- LEE, JOSEPH, MD
  Provider ID: 100368709004
  4004 BEYER BLVD
  SAN YSIDRO, CA 92173
  (619) 662-4100
  Teleservice
  Effective as of 01-NOV-15

- LEPEZ, DAVID, MD
  Provider ID: 100255267002
  4004 BEYER BLVD
  SAN YSIDRO, CA 92173
  (619) 662-4100
  Spanish
  Effective as of 01-APR-24

The network of your PCP may have its own network mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from the mental health service provider before it is covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

初級保健提供者

MOYA, MARY, MD
Provider ID: 100099596010
4004 BEYER BLVD
SAN YSIDRO, CA 92173
(619) 662-4100

MOYA, MARY, MD
Effective as of 01-APR-23

MOYA, MARY, MD
Effective as of 01-APR-23

MOYA, MARY, MD
Effective as of 01-APR-23

MOYA, MARY, MD
Effective as of 01-APR-23

NAVARRO, VANESSA, MD
Provider ID: 100173914012
3364 BEYER BLVD STE 103
SAN YSIDRO, CA 92173
(619) 662-4100

NAVARRO, VANESSA, MD
Effective as of 01-JAN-21

NAVARRO, VANESSA, MD
Effective as of 01-JAN-21

NAVARRO, VANESSA, MD
Effective as of 01-JAN-21

ORTEGA, LUIS, MD
Provider ID: 100394387002
4004 BEYER BLVD
SAN YSIDRO, CA 92173
(619) 662-4100

ORTEGA, LUIS, MD
Effective as of 01-OCT-22

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

ORTIZ ILIZALITURRI, ANA, MD
Effective as of 01-JAN-21

RAJAIPOUR, NEGIN, MD
Provider ID: 100300998007
3364 BEYER BLVD
SAN YSIDRO, CA 92173
(619) 662-4100

Farsi

RAJAIPOUR, NEGIN, MD
Effective as of 01-APR-23

Snyder, Christopher, DO
Provider ID: 100024789042
4004 BEYER BLVD
SAN YSIDRO, CA 92173
(619) 662-4100

Spanish

Snyder, Christopher, DO
Effective as of 01-OCT-22

Staley, Michaela, MD
Provider ID: 100359422003
4004 BEYER BLVD
SAN YSIDRO, CA 92173
(619) 662-4100

Filipino, Spanish, Tagalog

Staley, Michaela, MD
Effective as of 01-JAN-21

Talavera, Gregory, MD
Provider ID: 1000365847007
4004 BEYER BLVD
SAN YSIDRO, CA 92173
(619) 662-4100

Spanish Teleservice

Talavera, Gregory, MD
Effective as of 01-APR-23

FQHC

San Ysidro Health
Maternal and Child Health Ctr

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Provider ID: PG0047560015
3364 BEYER BLVD
SAN YSIDRO, CA 92173
(619) 662-4100

Teleservice

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

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Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21

San Ysidro Health
San Diego Pace Senior Hlth Svvs,
Effective as of 01-JAN-21
### Network Provider List

**Primary Care Providers**

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<td>(619) 662-4100</td>
<td>120 TOWN CENTER PKWY Santee, CA 92071</td>
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<td>(619) 662-4100</td>
<td>120 TOWN CENTER PKWY Santee, CA 92071</td>
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<td>SY, RAMON, MD</td>
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<td>100062889003</td>
<td>4004 BEYER BLVD, SAN YSIDRO, CA 92173</td>
<td>(619) 662-4100</td>
<td>Spanish, Tagalog</td>
<td>01-AUG-22</td>
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**Internal Medicine**

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<td>GUERRA, JACQUELINE, MD</td>
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<td>100324693006</td>
<td>120 TOWN CENTER PKWY Santee, CA 92071</td>
<td>(619) 873-3476</td>
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<td>WISNIEWSKI, MORRIS, MD</td>
<td></td>
<td>100018082007</td>
<td>380 STEVENS AVE STE 310 Solana Beach, CA 92075</td>
<td>(858) 554-1212</td>
<td>01-MAR-23</td>
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<tr>
<td>WISNIEWSKI, MORRIS, MD</td>
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<td>100018082011</td>
<td>380 STEVENS AVE STE 310 Solana Beach, CA 92075</td>
<td>(858) 554-1212</td>
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**Family Practice**

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<tr>
<td>VOURLITIS, MELISSA, DO</td>
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<td>100090572017</td>
<td>850 DEL MAR DOWNS RD Solana Beach, CA 92075</td>
<td>(858) 832-2500</td>
<td>01-NOV-23</td>
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<tr>
<td>BEHNAWA, SUSAN, MD</td>
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<td>1003436100010</td>
<td>27190 SUN CITY BLVD Sun City, CA 92586</td>
<td>(951) 676-4193</td>
<td>01-NOV-20</td>
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<td>BEHNAWA, SUSAN, MD</td>
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<td>27190 SUN CITY BLVD Sun City, CA 92586</td>
<td>(951) 676-4193</td>
<td>01-JAN-20</td>
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<td>GANTA, SANYASI, MD</td>
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<td>100113069006</td>
<td>26960 CHERRY HILLS BLVD STE A Sun City, CA 92586</td>
<td>(951) 672-2856</td>
<td>01-JAN-21</td>
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* Note: Effective dates vary for each provider.
C1. 網絡內提供者清單
初級保健提供者

- Hindi, Spanish, Telugu Teleservice
  Effective as of 01-AUG-16

**GANTA, SANYASI, MD**
Provider ID: 100113069009
26960 ChERRY Hills BLVD STE A
SUN CITY, CA 92586
(951) 672-2856
- Hindi, Spanish, Telugu Teleservice
  Effective as of 01-NOV-17

**STANFORD, DAVID, MD**
Provider ID: 100030388002
29798 HauN RD STE 308
SUN CITY, CA 92586
(951) 301-7611
- Effective as of 01-SEP-09

**FAMILY PRACTICE**

**AKLADEOS, NERMEEN, MD**
Provider ID: 100399707003
28780 single oAK DR STE 160
TEMECULA, CA 92590
(951) 676-4193
- Arabic
  Effective as of 01-AUG-23

**AYON MARTINEZ, CARLOS, MD**
Provider ID: 100152029006
41715 WINCHESTER RD
TEMECULA, CA 92590
(951) 694-9449
- Spanish
  Effective as of 01-AUG-20

**AYON MARTINEZ, CARLOS, MD**
Provider ID: 100152029006
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
(619) 440-2751
- Spanish
  Effective as of 01-DEC-21

**BERNARDO, STACEY, DO**
Provider ID: 100377889003
28780 single oAK DR STE 160
TEMECULA, CA 92590
(951) 676-4193
- Teleservice
  Effective as of 01-SEP-22

**INTERNAL MEDICINE**

**NGUYEN, DAVID, MD**
Provider ID: 100105561002
27830 BRADLEY RD
SUN CITY, CA 92586
(951) 679-2358
- Vietnamese
  Effective as of 01-NOV-12

**NGUYEN, THANG, MD**
Provider ID: 100068936002
27830 BRADLEY RD
SUN CITY, CA 92586
(951) 679-2358
- Vietnamese
  Effective as of 01-AUG-20

**BAILEY, CRISTINA, MD**
Provider ID: 100152029007
31170 TEMECULA PKWY STE 100
TEMECULA, CA 92592
(951) 698-6090
- Spanish
  Effective as of 01-JAN-16

**Camarillo, Daniel, MD**
Provider ID: 100110735016
28780 single oAK DR STE 160
TEMECULA, CA 92590
(951) 676-4193
- Spanish
  Effective as of 01-JUN-04

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

初級保健提供者

<table>
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<tr>
<th>Name</th>
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<td>ELKAYAM, ISAAC, MD</td>
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<td>(760) 520-8100</td>
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<td>IM, TAE WOONG, MD</td>
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<td>(951) 225-6400</td>
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<td>MILLER, BRANDON, DO</td>
<td>Provider ID: 1000865605005</td>
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<td>(951) 252-8650</td>
<td>Spanish</td>
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<tr>
<td>MCDONALD, ROBERT, MD</td>
<td>Provider ID: 100060861005</td>
<td>TEMECULA, CA 92592</td>
<td>(951) 303-3337</td>
<td>Tagalog</td>
<td>01-OCT-09</td>
</tr>
<tr>
<td>MCDONALD, MARY, MD</td>
<td>Provider ID: 100051408003</td>
<td>TEMECULA, CA 92592</td>
<td>(951) 303-3337</td>
<td>Tagalog</td>
<td>01-OCT-09</td>
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<tr>
<td>MILLER, BRANDON, DO</td>
<td>Provider ID: 100089154013</td>
<td>TEMECULA, CA 92592</td>
<td>(951) 303-3337</td>
<td>Tagalog</td>
<td>01-OCT-09</td>
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如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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**C1. 網絡內提供者清單**  
**初級保健提供者**

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**FAMILY PRACTICE**

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C1. 網絡內提供者清單

初級保健提供者

1926 VIA CTR
VISTA, CA 92081
(760) 940-7000
Effective as of 01-SEP-21

HIKES, RYAN, MD
Provider ID: 100391207004
1000 VALE TERRACE DR
VISTA, CA 92084
(760) 631-5000
Effective as of 01-NOV-22

HIKES, RYAN, MD
Provider ID: 100391207008
1000 VALE TERRACE DR
VISTA, CA 92084
(760) 631-5000
Effective as of 01-JAN-24

HIKES, RYAN, MD
Provider ID: 100397984039
134 GRAPEVINE RD
VISTA, CA 92083
(760) 631-5000
Effective as of 01-JAN-24

NOVAK, LOREN, DO
Provider ID: 100093766013
1926 VIA CENTRE DRIVE
SUITE A
VISTA, CA 92081
(760) 940-7000
Effective as of 01-SEP-21

ONG, DONALD, MD
Provider ID: 100033027006
1000 VALE TERRACE DR
VISTA, CA 92084
(760) 631-5000
Filipino, Spanish, Tagalog
Effective as of 01-JAN-24

POP, SIMONA, MD
Provider ID: 100021772013
145 THUNDER DR
VISTA, CA 92083
(760) 941-9002
Romanian
Effective as of 01-JUL-19

VIDAL, MONICA, DO
Provider ID: 100327876041
134 GRAPEVINE RD
VISTA, CA 92083
(844) 308-5003
Spanish

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C1. 網絡內提供者清單

初級保健提供者

VISTA, CA 92084
☎ (760) 631-5000
 европейский
有效的日期為 01-JAN-24

HALPERIN, JASON, MD
Provider ID: 100400241004
134 GRAPEVINE RD
VISTA, CA 92083
☎ (760) 631-5000
有效的日期為 01-JAN-24

KOBAYASHI, GARY, MD
Provider ID: 100090343008
145 THUNDER DR STE 1
VISTA, CA 92083
☎ (760) 941-9002
有效的日期為 01-SEP-21

LI, XIANGLI, MD
Provider ID: 100239749009
1926 VIA CTR STE A
VISTA, CA 92081
☎ (760) 940-7000
有效的日期為 01-SEP-21

MOASIS, KAREEM, MD
Provider ID: 100379398004
145 THUNDER DR
VISTA, CA 92083
☎ (760) 941-9002
有效的日期為 01-JAN-24

NGUYEN, ETHAN, MD
Provider ID: 100362686005
145 THUNDER DR
VISTA, CA 92083
☎ (760) 941-9002
有效的日期為 01-AUG-22

RHIANNON, JULIA, MD
Provider ID: 100382647007
105 DURIAN ST STE A
VISTA, CA 92083
☎ (760) 631-5000
有效的日期為 01-SEP-22

RUTMAN, MICHAEL, DO
Provider ID: 100024612005
2355 S MELROSE DR
VISTA, CA 92081
☎ (760) 598-0088
有效的日期為 01-OCT-00

SHALI, REYZAN, MD
Provider ID: 100113968008
1926 VIA CTR STE A
VISTA, CA 92083
☎ (760) 940-7000
有效的日期為 01-SEP-21

FAMILY PRACTICE

BONNICI, MARCELLA, MD
Provider ID: 100072106002
36320 INLAND VALLEY DR
STE 201
WILDOMAR, CA 92595
☎ (951) 816-3233
有效的日期為 01-OCT-16

INTERNAL MEDICINE

PATEL, REENABEN, MD
Provider ID: 100380064004
36243 INLAND VALLEY DR
STE 160
WILDOMAR, CA 92595
☎ (951) 698-8821
有效的日期為 01-JAN-22
C1. Network Provider List

**Certified Nurse Practitioner**

WONG, KRYSTLE, NP
Provider ID: N/A
- 26671 ALISO CREEK RD STE 202
  ALISO VIEJO, CA 92656
Effective as of 01-NOV-23

**Dermatology**

LANDER, JEFFREY, MD
Provider ID: N/A
- 24541 PACIFIC PARK DR
  STE 103
  ALISO VIEJO, CA 92656
Effective as of 01-DEC-22

LANDER, JEFFREY, MD
Provider ID: N/A
- 24541 PACIFIC PARK DR
  STE 103
  ALISO VIEJO, CA 92656
Effective as of 01-OCT-23

**Developmental Behavioral Pediatrics**

FELDMAN, GARY, MD
Provider ID: N/A
- 11 MAREBLU STE 200
  ALISO VIEJO, CA 92656
Effective as of 01-JAN-23

**Endocrinology Metabolism Diabetes**

NADEAU, DANIEL, MD
Provider ID: N/A
- 26671 ALISO CREEK RD STE 205
  ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

NADEAU, DANIEL, MD
Provider ID: N/A
- 26671 ALISO CREEK RD STE 205
  ALISO VIEJO, CA 92656
Effective as of 01-JUN-23

**Infectious Disease**

BAILEY, CHARLES, MD
Provider ID: N/A
- 26671 ALISO CREEK RD STE 301
  ALISO VIEJO, CA 92656
Effective as of 01-APR-23

BAILEY, CHARLES, MD
Provider ID: N/A
- 26671 ALISO CREEK RD STE 301
  ALISO VIEJO, CA 92656
Effective as of 01-APR-23

**Neurology**

BIXBY, MINDY, DO
Provider ID: N/A
- 26671 ALISO CREEK RD STE 203
  ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-JAN-23

BIXBY, MINDY, DO
Provider ID: N/A
- 26671 ALISO CREEK RD STE 203
  ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-JAN-23

Your PCP's provider group may have their own network mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require the mental health provider to obtain Blue Shield prior authorization before being covered.

To get the list of mental health service providers online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

專科護理醫師

203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-JAN-23

BIXBY, MINDY, DO
Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO
Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO
Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO
Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO
Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-FEB-23

BIXBY, MINDY, DO
Provider ID: N/A
26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Teleservice
Effective as of 01-JAN-23

LUDEMA, THOMAS, MD†
Provider ID: N/A
15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

LUDEMA, THOMAS, MD†
Provider ID: N/A
15 MAREBLU STE 250
ALISO VIEJO, CA 92656
Effective as of 01-OCT-18

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD
Provider ID: N/A
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ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

MARTINEZ, KENNETH, MD
Provider ID: N/A
5 JOURNEY STE 210
ALISO VIEJO, CA 92656
Effective as of 01-APR-23

SALEHI, HAMID, MD†
Provider ID: N/A
26895 ALISO CREEK RD STE B302
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

OPTOMETRIST

NGUYEN, LETHUY, OD†
Provider ID: N/A
27001 MOULTON PKWY STE A100
ALISO VIEJO, CA 92656
Effective as of 01-JAN-18

PEDIATRICS

FELDMAN, GARY, MD†
Provider ID: N/A
11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-FEB-23

FELDMAN, GARY, MD†
Provider ID: N/A
11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-FEB-23

YANNI, ELIZABETH, MD†
Provider ID: N/A
26671 ALISO CREEK RD STE 92
ALISO VIEJO, CA 92656
Effective as of 01-JAN-21

PHYSICIANS ASSISTANT

GREEN, TRAVIS, PA
Provider ID: N/A
26671 ALISO CREEK RD STE
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<td><strong>PULMONARY DISEASES</strong></td>
<td><strong>GALKO, BARBARA, MD</strong></td>
<td>N/A</td>
<td>11 MAREBLU STE 200 ALISO VIEJO, CA 92656</td>
<td>Effective as of 01-NOV-23</td>
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C1. 網絡內提供者清單
専科護理醫師

**SHAHINIAN, GEORGE, MD**
Provider ID: N/A
мысл 11 MAREBLU STE 200
ALISO VIEJO, CA 92656
Effective as of 01-MAR-24

**MEHTA, VIKRAM, MD**
Provider ID: N/A
мысл 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

**MEHTA, VIKRAM, MD**
Provider ID: N/A
мысл 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

**SURGERY NEUROLOGICAL**

**MEHTA, VIKRAM, MD**
Provider ID: N/A
мысл 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

**MEHTA, VIKRAM, MD**
Provider ID: N/A
мысл 26671 ALISO CREEK RD STE 203
ALISO VIEJO, CA 92656
Effective as of 01-DEC-23

**CERTIFIED NURSE PRACTITIONER**

**SANDERS, JESSICA, NP**
Provider ID: N/A
мысл 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Teleservice
Effective as of 01-NOV-22

**CHIROPRACTOR**

**KELCHNER, MATTHEW, DC**
Provider ID: N/A
мысл 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-JAN-21

**PHILLIPS, KATHERINE, DC**
Provider ID: N/A
мысл 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Effective as of 01-SEP-22

**FAMILY PRACTICE**

**VAN HOLLEBEKE, RACHEL, MD**
Provider ID: N/A
мысл 1620 ALPINE BLVD
ALPINE, CA 91901
Effective as of 01-JUN-23

**LICENSED CLINICAL SOCIAL WORKER**

**KHALEEL, AMMAR, LCSW**
Provider ID: N/A
мысл 1620 ALPINE BLVD
ALPINE, CA 91901
Effective as of 01-NOV-22

**OPHTHALMOLOGY**

**BINDLER, NICHOLAS, MD**
Provider ID: N/A
мысл 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

**CHANG, TOM, MD**
Provider ID: N/A
мысл 1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Effective as of 01-SEP-22

**PATEL, SARJAN, MD**
Provider ID: N/A
мысл 1620 ALPINE BLVD STE 117
ALPINE, CA 91901

Effective as of 01-SEP-22

**PATEL, GITANE, MD\(^\d\)**
Provider ID: N/A
- 1620 ALPINE BLVD STE 117
  ALPINE, CA 91901
Effective as of 01-SEP-22

**PATEL, GITANE, MD\(^\d\)**
Provider ID: N/A
- 1620 ALPINE BLVD STE 117
  ALPINE, CA 91901
Effective as of 01-JAN-21

**PATEL, GITANE, MD\(^\d\)**
Provider ID: N/A
- 1620 ALPINE BLVD STE 117
  ALPINE, CA 91901
Effective as of 01-MAR-18

**PATEL, GITANE, MD\(^\d\)**
Provider ID: N/A
- 1620 ALPINE BLVD STE 117
  ALPINE, CA 91901
Effective as of 01-AUG-20

**OPTOMETRIST**

**AOTO, KIM, OD\(^\d\)**
Provider ID: N/A
- 1620 ALPINE BLVD STE 117
  ALPINE, CA 91901
Effective as of 01-SEP-22

**DYER, SHARON, OD\(^\d\)**
Provider ID: N/A
- 1620 ALPINE BLVD STE 117
  ALPINE, CA 91901
Effective as of 01-JAN-21

**DYER, SHARON, OD\(^\d\)**
Provider ID: N/A
- 1620 ALPINE BLVD STE 117
  ALPINE, CA 91901
Effective as of 01-SEP-22

**MARR, RYAN, OD**
Provider ID: N/A
- 1620 ALPINE BLVD STE 117
  ALPINE, CA 91901
Effective as of 01-FEB-24

**PSYCHOLOGIST**

**FRITZ, JENNIFER, PhD\(^\d\)**
Provider ID: N/A
- 1620 ALPINE BLVD STE 110
  ALPINE, CA 91901
Effective as of 01-DEC-22

**SMITH, STEPHANIE, PhD\(^\d\)**
Provider ID: N/A
- 1620 ALPINE BLVD STE 110
  ALPINE, CA 91901
Effective as of 01-DEC-22

**OPTOMETRIST**

**HOLMSTROM, STEVEN, OD\(^\d\)**
Provider ID: N/A
- 31722 RAILROAD CANYON RD
  CANYON LAKE, CA 92587
Effective as of 01-JUL-23

**ANESTHESIOLOGY PAIN MANAGEMENT**

**MADHAV, SANDIP, MD\(^\d\)**
Provider ID: N/A
- 6010 HIDDEN VALLEY RD STE 200
  CARLSBAD, CA 92011
  Teleservice
Effective as of 01-JAN-20

**MADHAV, SANDIP, MD\(^\d\)**
Provider ID: N/A
- 6010 HIDDEN VALLEY RD STE 200
  CARLSBAD, CA 92011
  Teleservice
Effective as of 01-JAN-21

**PRASAD, RUPA, MD\(^\d\)**
Provider ID: N/A
- 6010 HIDDEN VALLEY RD STE 200
  CARLSBAD, CA 92011
  Teleservice
Effective as of 01-NOV-21

**PRASAD, RUPA, MD\(^\d\)**
Provider ID: N/A
- 6010 HIDDEN VALLEY RD STE 200
  CARLSBAD, CA 92011
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<td>1820 MARRON RD STE 102</td>
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<td>BINAVI, HOWNAZ, NP†</td>
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C1. 網絡內提供者清單

專科護理醫師

STE 200
CARLSBAD, CA 92011
Effective as of 01-AUG-23

**NEUROLOGY**

BAKER, DAVID, DO
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

BAKER, DAVID, DO
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-DEC-23

CHoudry, Bilal, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

CHoudry, Bilal, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-DEC-23

ORISHBERG, BENJAMIN, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

ORISHBERG, BENJAMIN, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

ORISHBERG, BENJAMIN, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-DEC-23

Farnsworth, William, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-22

Farnsworth, William, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

Farnsworth, William, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

您的
PCP
的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供
者。請注意，某些服務可能需要精神健康服務提供者獲得
Blue Shield
的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪
blueshieldca.com/fad

Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-FEB-22

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6010 HIDDEN VALLEY RD
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Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
C1. 網絡內提供者清單

**專科護理醫師**

CARLSBAD, CA 92011

Effective as of 01-FEB-16

**FRISHBERG, BENJAMIN, MD†**
Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011

 Effective as of 01-FEB-16

**HALL, JACOB, MD†**
Provider ID: N/A

6010 HIDDEN VALLEY RD
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Effective as of 01-FEB-21

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CARLSBAD, CA 92011

Effective as of 01-DEC-23

**HO, GILBERT, MD**
Provider ID: N/A

5814 VAN ALLEN WAY STE 209
CARLSBAD, CA 92008

Effective as of 01-JAN-21

**LANE, RICHARD, MD†**
Provider ID: N/A

6010 HIDDEN VALLEY RD
STE 200
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Effective as of 01-FEB-16

**LANE, RICHARD, MD†**
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*Your PCP's provider network may have network providers for mental health services. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization of the mental health provider to be eligible for coverage.*

*To view the mental health provider list online, visit blueshieldca.com/fad.*
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<td>DATE, AMIT, MD</td>
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<td>DONALDSON, CHADWICK, MD†</td>
<td>Specialist Care</td>
<td>N/A</td>
<td>2390 Faraday Ave</td>
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**NEUROPHYSIOLOGY CLINICAL**

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<td>N/A</td>
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<td>01-FEB-16</td>
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<td>WANG, CHUNYANG, MD†</td>
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C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-JAN-21

GOLDSZTEIN, HERNAN, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011
Effective as of 01-FEB-18

PAUL, SUPRITI, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011
Effective as of 01-JAN-21

SALGADO, MOSES, MD
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011
Effective as of 01-FEB-18

TIAN, QING, MD†
Provider ID: N/A
2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-JAN-21

TIAN, QING, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 210
CARLSBAD, CA 92011
Effective as of 01-FEB-22

TAHAEI, SEYED, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 110
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-22

PHYSICIANS ASSISTANT

DE VERA, SARAH, PA
Provider ID: N/A
2659 GATEWAY RD STE 106
CARLSBAD, CA 92009
Teleservice
Effective as of 01-APR-24

DRILLING, KATHERINE, PA
Provider ID: N/A
1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Teleservice
Effective as of 01-APR-24

INOCELDA, ANDREW, PA†
Provider ID: N/A
2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-NOV-21

INOCELDA, ANDREW, PA†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-OCT-22

FANNIN, HANAHA, PA
Provider ID: N/A
2659 GATEWAY RD STE 106
CARLSBAD, CA 92009
Effective as of 01-JAN-23

HERMANSON, KATHLEEN, PA†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-OCT-22

HERMANSON, KATHLEEN, PA†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

HUANG, STEPHANIE, PA†
Provider ID: N/A
1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Teleservice
Effective as of 01-OCT-22

HUANG, STEPHANIE, PA†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

INOCELDA, ANDREW, PA†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-SEP-22

INOCELDA, ANDREW, PA†
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A

RAHIM, ARIANNA, PA
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

MEGALI, NICOLE, PA
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-24

MEGALI, NICOLE, PA
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Teleservice
Effective as of 01-JAN-24

MORENO, SYDNE, PA
Provider ID: N/A
1905 CALLE BARCELONA
STE 211
CARLSBAD, CA 92009
Effective as of 01-APR-24

POGGI, SARA, PA
Provider ID: N/A
2390 FARADAY AVE
CARLSBAD, CA 92008
Teleservice
Effective as of 01-APR-24

POLLINGTON, CHRISTOPHER,
PA
Provider ID: N/A
6121 PASEO DEL NORTE
CARLSBAD, CA 92011
Teleservice
Effective as of 01-OCT-23

PSYCHIATRY

CAI, SHEILA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD²
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD²
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD²
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD²
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM,
ANDREA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM,
ANDREA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM,
ANDREA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM,
ANDREA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM,
ANDREA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

PAULITSCH-BUCKINGHAM,
ANDREA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23
PSYCHIATRY CHILD

CAI, SHEILA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-OCT-23

CAI, SHEILA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-SEP-22

CAI, SHEILA, MD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 115
CARLSBAD, CA 92011
Effective as of 01-SEP-22

KAUP, ALLISON, PhD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

KAUP, ALLISON, PhD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

KAUP, ALLISON, PhD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-24

KAUP, ALLISON, PhD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-NOV-23

NOEL, NANCY, PhD
Provider ID: N/A
6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-FEB-23

NOEL, NANCY, PhD
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NOEL, NANCY, PhD
Provider ID: N/A
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NOEL, NANCY, PhD
Provider ID: N/A
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CARLSBAD, CA 92009
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NOEL, NANCY, PhD
Provider ID: N/A
6768 PASEO DEL VIS
CARLSBAD, CA 92009
Effective as of 01-JAN-21

ROSEN, JAY, PhD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
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ROSEN, JAY, PhD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
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Effective as of 01-SEP-22

ROSEN, JAY, PhD†
Provider ID: N/A
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Effective as of 01-JAN-21

AMBROSE, CHRISTOPHER, PT
Provider ID: N/A
3070 MADISON ST
CARLSBAD, CA 92008
Effective as of 01-JAN-21
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<td>MACCHIO, GREGORY, MD†</td>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
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<tr>
<td>Thompson, Sandra, MD</td>
<td>N/A</td>
<td>786 3rd Ave Ste B</td>
<td>Chula Vista, CA 91910</td>
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<td>Verdolin, Michael, MD</td>
<td>N/A</td>
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<tr>
<td>Audiologist</td>
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<tr>
<td>Horner, Heather, AuD</td>
<td>N/A</td>
<td>310 3rd Ave Ste B21</td>
<td>Chula Vista, CA 91910</td>
<td>01-Jun-22</td>
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<tr>
<td>Jespersen, Rhonda, AuD</td>
<td>N/A</td>
<td>2452 Fenton St Ste C101</td>
<td>Chula Vista, CA 91914</td>
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**Anesthesiology**

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<tr>
<td>Macchio, Gregory, MD</td>
<td>N/A</td>
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<tr>
<td>Afternoon, Rosa, MD</td>
<td>N/A</td>
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<tr>
<td>Afternoon, Rosa, MD</td>
<td>N/A</td>
<td>2452 Fenton St Ste C203</td>
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**Critical Care Medicine**

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<td>Macchio, Gregory, MD</td>
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<td>2452 Fenton St Ste C101</td>
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<td>Macchio, Gregory, MD</td>
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<td>2452 Fenton St Ste C203</td>
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<td>01-Sep-22</td>
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**Anesthesiology Pain Management**

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<td>2452 Fenton St Ste C203</td>
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</table>

Your PCP's provider network may have its own network of mental health services providers. Please refer to the list below. You can directly contact any of these providers. Please note that certain services may require prior authorization from a mental health service provider with Blue Shield, then paid at the provider's contracted rate.

To access the mental health services provider list online, please visit blueshieldca.com/fad.
310 3RD AVE STE B21
CHULA VISTA, CA 91910
Effective as of 01-JAN-23

C1. 網絡內提供者清單

CARDIAC

ELECTROPHYSIOLOGY

ATHILL, CHARLES, MD†
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

BERMAN, BRETT, MD†
Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-16

DAWOOD, FARAH, MD†
Provider ID: N/A
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-DEC-20

LERNER, JONATHAN, MD
Provider ID: N/A
865 THIRD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

LERNER, JONATHAN, MD
Provider ID: N/A
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

PUGH, MATTHEW, DO†
Provider ID: N/A
765 MEDICAL CENTER CT STE 205
CHULA VISTA, CA 91911
Effective as of 01-NOV-21

AIZIN, VITALI, MD†
Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

BERMAN, BRETT, MD†
Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-21

CARLSON, STEVEN, MD†
Provider ID: N/A
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

CARLSON, STEVEN, MD†
Provider ID: N/A
751 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

AIZIN, VITALI, MD†
Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-21

AIZIN, VITALI, MD†
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-14
C1. Network Providers List

CEPIN, DANIEL, MD†
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-AUG-21

COX, JUSTIN, MD†
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-SEP-21

DAWOOD, FARAH, MD†
Provider ID: N/A
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

DAWOOD, FARAH, MD†
Provider ID: N/A
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

DO, HULBERT, MD
Provider ID: N/A
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

DO, HULBERT, MD
Provider ID: N/A
865 THIRD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†
Provider ID: N/A
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

GOLLAPUDI, RAGHAVA, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

HOURANI, RAYAN, MD
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-FEB-23

KAFRI, HASSAN, MD†
Provider ID: N/A
429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

KHAN, HASHIM, MD†
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-APR-21

KIM, JAMES, MD†
Provider ID: N/A
754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-21

LY, NANCY, MD†
Provider ID: N/A
754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

LY, NANCY, MD†
Provider ID: N/A
754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Effective as of 01-NOV-23

LY, NANCY, MD†
Provider ID: N/A
754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

MEHTA, HIRSCH, MD†
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†
Provider ID: N/A
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

MONDRAGON, GUSTAVO, MD†
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
480 4TH AVE STE 500
CHULA VISTA, CA 91910
Effective as of 01-NOV-20

MONDRAGON, GUSTAVO, MD
Provider ID: N/A
855 THIRD AVE
STE 2230
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

NAGHI, JESSE, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-AUG-21

NARAYANAN, MEENA, MD†
Provider ID: N/A
765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

NISHIMURA, MARIN, MD
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-MAR-23

OMSAN, JAD, MD
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-SEP-21

PONCE, SONIA, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-FEB-24

PONCE, SONIA, MD†
Provider ID: N/A
340 4TH AVE STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

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340 4TH AVE STE 11
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PONCE, SONIA, MD†
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NARAYANAN, MEENA, MD†
Provider ID: N/A
765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PARIKH, MILIND, DO†
Provider ID: N/A
765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-23

SARSAM, LUAY, MD
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD
Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD
Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SARSAM, LUAY, MD
Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SHAH, KULIN, MD†
Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†
Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SHAH, KULIN, MD†
Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SHEREV, DIMITRI, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-JUL-23

SHEREV, DIMITRI, MD
Provider ID: N/A

340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-23

SUDHAKAR, DEEPTHI, MD†
Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†
Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

WYSOCZANSKI, MARIUSZ, MD†
Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JUN-21

YAU, STEPHEN, MD†
Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-21

YAU, STEPHEN, MD†
Provider ID: N/A

429 BROADWAY
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-23

ZAVARO, SUHAIL, MD
Provider ID: N/A

890 EASTLAKE PKWY STE
205
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-FEB-23

CERTIFIED
ACUPUNCTURIST

LAM, KHANH, LAC†
Provider ID: N/A

340 4TH AVE STE 19
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-21

WILCOX, WENONAH, LAC†
Provider ID: N/A

786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

CERTIFIED NURSE
PRACTITIONER
C1. 網絡內提供者清單
專科護理醫師

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<td>SPALDING, ENJOLI, NP†</td>
<td>752 MEDICAL CENTER CT STE 101</td>
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<td>TOMICICH, STEPHANIE, NP</td>
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<td>YALDO, ATHMAR, NP†</td>
<td>429 BROADWAY</td>
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C1. 網絡內提供者清單

專科護理醫師

CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

CERTIFIED REGISTERED NURSE MIDWIFE

MARTINEZ, NANCY, CRNM
Provider ID: N/A

678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

CHIROPRACTOR

WENDEL, TREVOR, DC
Provider ID: N/A

535 H ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DERMATOLOGY

ANGEA, KUNAL, MD
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

BARNARD, CHRISTOPHER, MD
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Effective as of 01-MAR-24

BARNARD, CHRISTOPHER, MD
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Effective as of 01-MAR-24

MCKESEY, JACQUELINE, MD
Provider ID: N/A

256 LANDIS AVE FL 3
CHULA VISTA, CA 91910
Effective as of 01-FEB-23

RULLAN, PETER, MD†
Provider ID: N/A

256 LANDIS AVE STE 300
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

RULLAN, JENNIFER, MD†
Provider ID: N/A

256 LANDIS AVE STE 300
CHULA VISTA, CA 91910
Effective as of 01-MAR-14

STEIN, ALEXANDER, MD†
Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

STEIN, ALEXANDER, MD†
Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

STEIN, ALEXANDER, MD†
Provider ID: N/A

340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

STEIN, ALEXANDER, MD†
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-MAY-23

TOMPKINS, STACY, MD†
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-22

TOMPKINS, STACY, MD†
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ZALESKI LARSEN, LISA, DO
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-JAN-24

ZALESKI LARSEN, LISA, DO
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ZALESKI LARSEN, LISA, DO
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-MAY-23

EMERGENCY MEDICINE

AZAM, ARSALAN, MD
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-22

TOMPKINS, STACY, MD†
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-NOV-23

ZALESKI LARSEN, LISA, DO
Provider ID: N/A

2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-MAY-23
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<th>Provider ID</th>
<th>Name</th>
<th>Address</th>
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<td>BRODAK, DANIKA, MD</td>
<td>333 H ST STE 2080</td>
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C1. 網絡內提供者清單

專科護理醫師

<table>
<thead>
<tr>
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<td>WHITLEY, NICHOLAS, MD†</td>
<td>N/A</td>
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<td>ROXAS, ROGER, MD†</td>
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<td>TEOVAR, JUAN, MD†</td>
<td>N/A</td>
<td>333 H ST STE 2080</td>
<td>CHULA VISTA</td>
<td>91910</td>
<td>01-JUL-22</td>
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<tr>
<td>TOSENIKEN, MEGAN, MD†</td>
<td>N/A</td>
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<td>CHULA VISTA</td>
<td>91910</td>
<td>01-JUL-22</td>
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<tr>
<td>ROGERS, STEPHAN, MD†</td>
<td>N/A</td>
<td>480 4TH AVE STE 202A</td>
<td>CHULA VISTA</td>
<td>91910</td>
<td>01-JUL-22</td>
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ENDOCRINOLOGY

METABOLISM DIABETES

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<tr>
<th>Name</th>
<th>ID</th>
<th>Address</th>
<th>City, State</th>
<th>Zip Code</th>
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<tr>
<td>ARGOU, GEORGES, MD†</td>
<td>N/A</td>
<td>340 4TH AVE STE 7A</td>
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<td>01-JAN-22</td>
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<td>ARGOU, GEORGES, MD†</td>
<td>N/A</td>
<td>340 4TH AVE STE 7A</td>
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<td>91910</td>
<td>01-JUL-22</td>
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<tr>
<td>ARGOU, GEORGES, MD†</td>
<td>N/A</td>
<td>340 4TH AVE STE 7A</td>
<td>CHULA VISTA</td>
<td>91910</td>
<td>01-JUL-22</td>
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<tr>
<td>ARGOU, GEORGES, MD†</td>
<td>N/A</td>
<td>340 4TH AVE STE 7A</td>
<td>CHULA VISTA</td>
<td>91910</td>
<td>01-JUL-22</td>
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</tbody>
</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
<table>
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<tr>
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<td>CHULA VISTA, CA 91910</td>
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<tr>
<td>Teleservice</td>
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<td>Effective as of 01-AUG-22</td>
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**VINCENT, LAUREN, MD**
Provider ID: N/A
��
303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-23

**GASTROENTEROLOGY**

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<td>Effective as of 01-OCT-21</td>
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**DILLON, MAYRA, MD**
Provider ID: N/A
��
880 THIRD AVE
# A
CHULA VISTA, CA 91911
Effective as of 01-AUG-23

**FAMILY PRACTICE**

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**LOZANO, JUAN, MD**
Provider ID: N/A
都能
1637 THIRD AVE
STE B
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

**RODRIGUEZ, NATALIE, MD**
Provider ID: N/A
都能
480 PALOMAR ST
CHULA VISTA, CA 91911*
Effective as of 01-NOV-23

**SHAFT, ALEXANDER, MD**
Provider ID: N/A
都能
303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-22

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**DUQUE, JOHN, MD**
Provider ID: N/A
都能
480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

**DUQUE, JOHN, MD**
Provider ID: N/A
都能
480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

**DUQUE, JOHN, MD**
Provider ID: N/A
都能
480 4TH AVE STE 316
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

**HASSANEIN, TAREK, MD**
Provider ID: N/A
都能
303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

**HASSANEIN, TAREK, MD**
Provider ID: N/A
都能
303 H ST STE 103
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22
C1. 網絡內提供者清單

专科護理醫師

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HASSANEIN, TAREK, MD†
Provider ID: N/A
| 256 LANDIS AVE STE 204 |
| CHULA VISTA, CA 91910 |
| Effective as of 01-SEP-15 |

HASSANEIN, TAREK, MD†
Provider ID: N/A
| 256 LANDIS AVE STE 202 |
| CHULA VISTA, CA 91910 |
| Effective as of 01-SEP-22 |

HASSANEIN, TAREK, MD†
Provider ID: N/A
| 1323 3RD AVE |
| CHULA VISTA, CA 91911 |
| Effective as of 01-SEP-22 |

KORN, ERROL, MD
Provider ID: N/A
| 769 MEDICAL CENTER CT |
| STE 303 |
| CHULA VISTA, CA 91911 |
| Effective as of 01-APR-21 |

KORN, ERROL, MD
Provider ID: N/A
| 769 MEDICAL CENTER CT |
| STE 303 |
| CHULA VISTA, CA 91911 |
| Effective as of 01-JUL-23 |

NOVO, MEGAN, MD
Provider ID: N/A
| 296 H ST STE 301 |
| CHULA VISTA, CA 91910 |
| Effective as of 01-JAN-23 |

SEVILLA, CLAUDIA, MD†
Provider ID: N/A
| 750 MEDICAL CENTER CT |
| STE 14 |
| CHULA VISTA, CA 91911 |
| Teleservice |
| Effective as of 01-SEP-22 |

SWEET, PATRICK, MD†
Provider ID: N/A
| 353 CHURCH AVE STE A |
| CHULA VISTA, CA 91910 |
| Teleservice |
| Effective as of 01-MAY-22 |

THOMAS, CARLTON, MD†
Provider ID: N/A
| 296 H ST |
| CHULA VISTA, CA 91910 |
| Effective as of 01-APR-21 |

WIENER, GREGORY, MD†
Provider ID: N/A
| 353 CHURCH AVE STE A |
| CHULA VISTA, CA 91910 |
| Effective as of 01-JAN-14 |

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA†
Provider ID: N/A
| 310 3RD AVE STE B21/C11 |
| CHULA VISTA, CA 91910 |
| Effective as of 01-JAN-14 |

ANDERSON, ELAINE, MA†
Provider ID: N/A
| 310 3RD AVE STE C11 |
| CHULA VISTA, CA 91910 |
| Effective as of 01-SEP-22 |

DAVIS, KELLE, MA†
Provider ID: N/A
| 353 CHURCH AVE STE A |
| CHULA VISTA, CA 91910 |
| Effective as of 01-JAN-21 |

Hematology / Oncology

ANDREY, JEFFREY, MD†
Provider ID: N/A
<p>| 450 4TH AVE STE 311 |</p>
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<td><strong>BASERI, BABAK, MD</strong></td>
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<td><strong>BASERI, BABAK, MD</strong></td>
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<td><strong>ITURBE-ALESSIO, IGNACIO, MD</strong></td>
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<td><strong>NORTON, MARILYN, MD</strong></td>
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<td>01-FEB-22</td>
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<tr>
<td><strong>NORTON, MARILYN, MD</strong></td>
<td>769 MEDICAL CENTER CT STE 202</td>
<td>CHULA VISTA, CA 91911</td>
<td>01-MAY-15</td>
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<td><strong>QUIROZ, ELISA, MD</strong></td>
<td>678 3RD AVE</td>
<td>CHULA VISTA, CA 91910</td>
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**INTERNAL MEDICINE**

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<tr>
<td><strong>BALDERAS-MAGALLANES, RODOLFO, MD</strong></td>
<td>678 THIRD AVE</td>
<td>CHULA VISTA, CA 91910</td>
<td>01-APR-24</td>
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<tr>
<td><strong>CHITKARA, PUJA, MD</strong></td>
<td>765 MEDICAL CENTER CT STE 216</td>
<td>CHULA VISTA, CA 91911</td>
<td>01-JAN-21</td>
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</table>

Note: All providers listed are effective as of specified dates. Some have Teleservice available.
C1. 網絡內提供者清單
专科護理醫師

LIRA, JOSE, MD
Provider ID: N/A
841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-NOV-23

LIU, ANDREW, MD
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MEYER, JILL, MD
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-23

MEYER, JILL, MD
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-24

MOOLANI, UJJALA, MD
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

SOLTERO, RICARDO, MD
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-OCT-21

INTERVENTIONAL CARDIOLOGY

AIZIN, VITALI, MD
Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-FEB-16

BARVALIA, MIHIR, MD
Provider ID: N/A
752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

BERMAN, BRETT, MD
Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

BERMAN, BRETT, MD
Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-MAR-16
C1. 網絡內提供者清單

網路內提供者清單

專科護理醫師

CEPIN, DANIEL, MD†
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-DEC-22

FERNANDEZ, GENARO, MD†
Provider ID: N/A
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-MAR-23

GOLLAPUDI, RAGHAVA, MD†
Provider ID: N/A
890 EASTLAKE PKWY STE 205
CHULA VISTA, CA 91914
Effective as of 01-JAN-21

JOHN, ALAN, MD
Provider ID: N/A
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†
Provider ID: N/A
429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

KAFRI, HASSAN, MD†
Provider ID: N/A
429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-APR-21

KAFRI, HASSAN, MD†
Provider ID: N/A
429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KAFRI, HASSAN, MD†
Provider ID: N/A
429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MOHAMEDALI, BURHAN, MD†
Provider ID: N/A
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

MONDRAGON, GUSTAVO, MD†
Provider ID: N/A
480 4TH AVE STE 500
CHULA VISTA, CA 91910*
Effective as of 01-JAN-21

NAGHI, JESSE, MD†
Provider ID: N/A
752 MEDICAL CENTER CT STE 207
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

NARAYANAN, MEENA, MD†
Provider ID: N/A
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Effective as of 01-OCT-23

PONCE, SONIA, MD†
Provider ID: N/A
340 4TH AVE STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

PONCE, SONIA, MD†
Provider ID: N/A
340 4TH AVE STE 11
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

PONCE, SONIA, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

ROUGH, STEVEN, MD
Provider ID: N/A
754 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-OCT-23

ROUGH, STEVEN, MD

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C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-24

ROUGH, STEVEN, MD
Provider ID: N/A

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-24

RUBIO GARCIA, MANOLO, MD†
Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†
Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†
Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†
Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-MAY-23

SHAH, KULIN, MD†
Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

754 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SHARF, ALBERT, MD
Provider ID: N/A

1310 3RD AVE STE B4
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SHEREV, DIMITRI, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-OCT-19

SHEREV, DIMITRI, MD†
Provider ID: N/A

752 MEDICAL CENTER CT
STE 207
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

SUDHAKAR, DEEPTHI, MD†
Provider ID: N/A

765 MEDICAL CENTER CT
STE 211
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SUDHAKAR, DEEPTHI, MD†
Provider ID: N/A

865 3RD AVE STE 133
CHULA VISTA, CA 91911
Effective as of 01-APR-23

WYSOCZANSKI, MARIUSZ, MD†
Provider ID: N/A

750 MEDICAL CENTER CT
STE 3
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

WYSOCZANSKI, MARIUSZ, MD†
Provider ID: N/A

1061 TIERRA DEL REY STE 305
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

MARRIAGE FAMILY THERAPIST

CAMARGO, SANDRA, MFT
Provider ID: N/A

880 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-DEC-22

CASTELLANOS, GRACIELA, MFT†
Provider ID: N/A

1061 TIERRA DEL REY STE 304
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

CASTELLANOS, GRACIELA, MFT†
Provider ID: N/A

1061 TIERRA DEL REY STE 305
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

SHIELDS, SEBASTIAN, MFT
Provider ID: N/A

678 3RD AVE
C1. 網絡內提供者清單

專科護理醫師

<table>
<thead>
<tr>
<th>聯絡人</th>
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<th>有效日期</th>
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<td>AL-DAHHAN, ZAID, MD</td>
<td>340 4TH AVE STE 4</td>
<td>01-JUN-23</td>
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<tr>
<td>FERNANDEZ, RODRIGO, MD†</td>
<td>450 4TH AVE STE 201</td>
<td>01-MAY-21</td>
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<td>HOREISH, ADAM, MD†</td>
<td>340 4TH AVE STE 4</td>
<td>01-AUG-15</td>
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<td>KAYAL, ANAS, MD†</td>
<td>296 H ST STE 304</td>
<td>01-SEP-22</td>
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<td>KHAING, KATHY, MD†</td>
<td>340 4TH AVE STE 4</td>
<td>01-JUL-22</td>
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<td>KHAING, KATHY, MD†</td>
<td>752 MEDICAL CENTER CT STE 302</td>
<td>01-JAN-21</td>
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<td>LOZADA-PASTORIO, ELIZABETH, MD†</td>
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如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

MEYER, JILL, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MEYER, JILL, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-AUG-14

MEYER, JILL, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

MEYER, JILL, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MEYER, JILL, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

MOOLANI, UJJALA, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MOOLANI, UJJALA, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-FEB-23

MOOLANI, UJJALA, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-NOV-22

MOOLANI, UJJALA, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MOOLANI, UJJALA, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-23

MOOLANI, UJJALA, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-OCT-22

PATEL, AMAR, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

PATEL, AMAR, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

PHAM, JENNIFER, MD
Provider ID: N/A
340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-23

PHAM, JENNIFER, MD
Provider ID: N/A
340 FOURTH AVE
STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

SOLTERO, RICARDO, MD†
Provider ID: N/A
340 4TH AVE STE 14
CHULA VISTA, CA 91910
Effective as of 01-APR-17

SOLTERO, RICARDO, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

SOLTERO, RICARDO, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

SOLTERO, RICARDO, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JAN-21
C1. 網絡內提供者清單
専科護理醫師

SOLTERO, RICARDO, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

VIDEEN, JOHN, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†
Provider ID: N/A
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

VIDEEN, JOHN, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

VIDEEN, JOHN, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

VIDEEN, JOHN, MD†
Provider ID: N/A
786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†
Provider ID: N/A
752 MEDICAL CENTER CT
STE 302
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VIDEEN, JOHN, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

VIDEEN, JOHN, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

VIDEEN, JOHN, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

GRATIANNE, ROBERTO, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

GUPTA, MONIKA, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

HUISA-GARATE, BRANKO, MD†
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†
Provider ID: N/A
450 FOURTH AVE
STE 215
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

HUISA-GARATE, BRANKO, MD†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

123
C1. 網絡內提供者清單
專科護理醫師

<table>
<thead>
<tr>
<th>網路內提供者</th>
<th>服務類型</th>
<th>網點地址</th>
<th>效力日期</th>
</tr>
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<tbody>
<tr>
<td>HUISA-GARATE, BRANKO, MD †</td>
<td></td>
<td>450 4TH AVE STE 215 CHULA VISTA, CA 91910</td>
<td>Effective as of 01-JAN-21</td>
</tr>
<tr>
<td>MOHAMMAD, AHMAD SHAH, MD †</td>
<td>Teleservice</td>
<td>450 FOURTH AVE STE 215 CHULA VISTA, CA 91910</td>
<td>Effective as of 01-AUG-23</td>
</tr>
<tr>
<td>MOHAMMAD, AHMAD SHAH, MD †</td>
<td>Teleservice</td>
<td>750 MEDICAL CENTER CT STE 6 CHULA VISTA, CA 91911</td>
<td>Effective as of 01-JAN-21</td>
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<tr>
<td>MAREK, MAKSYM, MD</td>
<td>Teleservice</td>
<td>450 FOURTH AVE STE 215 CHULA VISTA, CA 91910</td>
<td>Effective as of 01-FEB-24</td>
</tr>
<tr>
<td>MAREK, MAKSYM, MD</td>
<td>Teleservice</td>
<td>750 MEDICAL CENTER CT STE 6 CHULA VISTA, CA 91911</td>
<td>Effective as of 01-JAN-21</td>
</tr>
<tr>
<td>SILVER, BRENT, MD †</td>
<td>Teleservice</td>
<td>450 4TH AVE STE 215 CHULA VISTA, CA 91910</td>
<td>Effective as of 01-FEB-24</td>
</tr>
<tr>
<td>SILVER, BRENT, MD †</td>
<td>Teleservice</td>
<td>450 4TH AVE STE 215 CHULA VISTA, CA 91910</td>
<td>Effective as of 01-DEC-22</td>
</tr>
<tr>
<td>SORIA LOPEZ, JOSE, MD †</td>
<td>Teleservice</td>
<td>450 4TH AVE STE 215 CHULA VISTA, CA 91910</td>
<td>Effective as of 01-SEP-21</td>
</tr>
<tr>
<td>SORIA LOPEZ, JOSE, MD †</td>
<td>Teleservice</td>
<td>CHULA VISTA, CA 91910</td>
<td>Effective as of 01-MAR-21</td>
</tr>
<tr>
<td>OLENSKI, KLARI, DO †</td>
<td>Teleservice</td>
<td>450 4TH AVE STE 215 CHULA VISTA, CA 91910</td>
<td>Effective as of 01-JAN-21</td>
</tr>
<tr>
<td>OLENSKI, KLARI, DO †</td>
<td>Teleservice</td>
<td>450 4TH AVE STE 215 CHULA VISTA, CA 91910</td>
<td>Effective as of 01-MAY-22</td>
</tr>
</tbody>
</table>

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C1. 網絡內提供者清單
專科護理醫師

CHAC, RICK, MD
Provider ID: N/A
765 MEDICAL CENTER CT STE 209
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

CHAC, RICK, MD
Provider ID: N/A
660 OLD TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-AUG-20

CHAC, RICK, MD
Provider ID: N/A
660 OLD TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

CHAC, RICK, MD
Provider ID: N/A
660 OLD TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

CHAC, RICK, MD
Provider ID: N/A
660 OLD TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-20

CHAC, RICK, MD
Provider ID: N/A
660 OLD TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
Effective as of 01-SEP-16

HUGHES, ELISA, OT
Provider ID: N/A
880 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUN-22

LOPEZ, ALYSSA-NICOLE, OT
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-DEC-23

LOPEZ, ALYSSA-NICOLE, OT
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-OCT-23

MORRIS, SHEILA, OT
Provider ID: N/A
1020 TIERRA DEL REY STE A-1
CHULA VISTA, CA 91910
Effective as of 01-SEP-22

PORTER, EILEEN, OT
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

PORTER, EILEEN, OT
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-JAN-22

OPHTHALMOLOGY

BRYANT, DUANE, MD
Provider ID: N/A
342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21
C1. 網絡內提供者清單

BRYANT, DUANE, MD†
Provider ID: N/A
342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BRYANT, DUANE, MD†
Provider ID: N/A
342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

BRYANT, DUANE, MD†
Provider ID: N/A
342 F ST
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

CARRABY, ARNETT, MD†
Provider ID: N/A
835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

CARRABY, ARNETT, MD†
Provider ID: N/A
835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

CARRABY, ARNETT, MD†
Provider ID: N/A
835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22

MANI, NASRIN, MD†
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MASLIN, JESSICA, MD
Provider ID: N/A
480 FOURTH AVE
STE 201
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

MASLIN, JESSICA, MD
Provider ID: N/A
311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

MASLIN, JESSICA, MD
Provider ID: N/A
311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

MASLIN, JESSICA, MD
Provider ID: N/A
311 DEL MAR AVE
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

MASLIN, JESSICA, MD
Provider ID: N/A
480 FOURTH AVE
STE 201
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

MCDONNELL, EMMA, MD†
Provider ID: N/A
835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-APR-23

MCDONNELL, EMMA, MD†
Provider ID: N/A
835 3RD AVE STE A
CHULA VISTA, CA 91911
Effective as of 01-JUL-22
### C1. 網絡內提供者清單

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<th>名稱</th>
<th>提供者ID</th>
<th>地址</th>
<th>電話</th>
<th>有效日期</th>
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<tbody>
<tr>
<td>PONS, MAURICIO, MD†</td>
<td>N/A</td>
<td>835 3RD AVE STE A CHULA VISTA, CA 91911</td>
<td></td>
<td>Effective as of 01-SEP-22</td>
</tr>
<tr>
<td>SCHER, BARRY, MD†</td>
<td>N/A</td>
<td>480 4TH AVE STE 201 CHULA VISTA, CA 91910</td>
<td></td>
<td>Effective as of 01-JUL-22</td>
</tr>
<tr>
<td>RAJSBAUM, MARTIN, MD†</td>
<td>N/A</td>
<td>311 DEL MAR AVE CHULA VISTA, CA 91910</td>
<td></td>
<td>Effective as of 01-MAR-23</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Provider ID</th>
<th>Address</th>
<th>City, State, Zip</th>
<th>Effective Date</th>
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</thead>
<tbody>
<tr>
<td>SKAF, AYHAM, MD†</td>
<td></td>
<td>N/A</td>
<td>678 3RD AVE</td>
<td>CHULA VISTA, CA 91910</td>
<td>Effective as of 01-JUL-22</td>
</tr>
<tr>
<td>STAINER, GREGORY, MD†</td>
<td></td>
<td>N/A</td>
<td>835 3RD AVE STE A</td>
<td>CHULA VISTA, CA 91911</td>
<td>Effective as of 01-JAN-21</td>
</tr>
<tr>
<td>ZABANEH, ALEXANDER, MD†</td>
<td></td>
<td>N/A</td>
<td>342 F ST</td>
<td>CHULA VISTA, CA 91910</td>
<td>Effective as of 01-JUL-20</td>
</tr>
<tr>
<td>ZABANEH, ALEXANDER, MD†</td>
<td></td>
<td>N/A</td>
<td>342 F ST</td>
<td>CHULA VISTA, CA 91910</td>
<td>Effective as of 01-JAN-24</td>
</tr>
<tr>
<td>ZABANEH, ALEXANDER, MD†</td>
<td></td>
<td>N/A</td>
<td>342 F ST</td>
<td>CHULA VISTA, CA 91910</td>
<td>Effective as of 01-NOV-20</td>
</tr>
<tr>
<td>ZABANEH, ALEXANDER, MD†</td>
<td></td>
<td>N/A</td>
<td>342 F ST</td>
<td>CHULA VISTA, CA 91910</td>
<td>Effective as of 01-NOV-23</td>
</tr>
<tr>
<td>ZABANEH, ALEXANDER, MD†</td>
<td></td>
<td>N/A</td>
<td>342 F ST</td>
<td>CHULA VISTA, CA 91910</td>
<td>Effective as of 01-JAN-24</td>
</tr>
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<td>OPTOMETRIST</td>
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<td>CHAIN, PEI CHI, OD</td>
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**OTOLARYNGOLOGY**

<table>
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<tr>
<th>Name</th>
<th>Title</th>
<th>Provider ID</th>
<th>Address</th>
<th>City, State, Zip</th>
<th>Effective Date</th>
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<tbody>
<tr>
<td>ABDOU, RAMI, MD†</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

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如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

網絡內提供者清單

專科護理醫師

Provider ID: N/A
577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD‡
Provider ID: N/A
577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

BANTHIA, VISHAL, MD‡
Provider ID: N/A
577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD‡
Provider ID: N/A
577 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-21

CALZADA, AUDREY, MD‡
Provider ID: N/A
577 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-OCT-22

CHANG, EDWARD, MD
Provider ID: N/A
577 THIRD AVE,
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

JIMENEZ, CARLOS, MD‡
Provider ID: N/A
321 E ST STE A
CHULA VISTA, CA 91910
Effective as of 01-OCT-20

JIMENEZ, CARLOS, MD‡
Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

PATSIAS, ALEXIS, MD‡
Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-APR-21

PATSIAS, ALEXIS, MD‡
Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-MAY-21

PATSIAS, ALEXIS, MD‡
Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

SAEZ, NEIL, MD
Provider ID: N/A
2060 OTAY LAKES RD STE
140
CHULA VISTA, CA 91913
Effective as of 01-JAN-24

SCHALCH LEPE, PAUL, MD‡
Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUL-22

SCHALCH LEPE, PAUL, MD‡
Provider ID: N/A
765 MEDICAL CENTER CT
STE 210
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

WOO, LINDA, MD‡
Provider ID: N/A
C1. 網絡內提供者清單

專科護理醫師

- WOO, LINDA, MD†
  - Provider ID: N/A
  - 321 E ST
    - CHULA VISTA, CA 91910
    - Effective as of 01-AUG-21
  - Provider ID: N/A
  - 321 E ST
    - CHULA VISTA, CA 91910
    - Effective as of 01-MAR-18
  - Provider ID: N/A
  - 321 E ST STE A
    - CHULA VISTA, CA 91910
    - Effective as of 01-SEP-22

- PEDIATRICS

  - PIANSAY, MARIA CORAZON, MD
    - Provider ID: N/A
    - 1637 3RD AVE STE H-I
      - CHULA VISTA, CA 91911
      - Effective as of 01-MAY-23

- PHYS MED/ REHAB PAIN MEDICINE

  - KATZEN, SETH, DO
    - Provider ID: N/A
    - 480 4TH AVE STE 501
      - CHULA VISTA, CA 91910
      - Effective as of 01-MAY-23
  - KATZEN, SETH, DO
    - Provider ID: N/A
    - 480 4TH AVE STE 501
      - CHULA VISTA, CA 91910
      - Effective as of 01-MAR-24
  - KOLODGE, GAVIN, DO
    - Provider ID: N/A
    - 955 LANE AVE STE 200
      - CHULA VISTA, CA 91914
      - Effective as of 01-SEP-23
  - TAHAEI, SEYED, MD†
    - Provider ID: N/A
    - 340 4TH AVE STE 19
      - CHULA VISTA, CA 91910
      - Teleservice
      - Effective as of 01-OCT-22

- PHYSICIANS ASSISTANT

  - BEITTER, KEERSTIN, PA†
    - Provider ID: N/A
    - 340 4TH AVE STE 19
      - CHULA VISTA, CA 91910
C1. 網絡內提供者清單

CHAN, ALONSO, PA†
Provider ID: N/A
299 J ST
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DOUGHERTY, CLARA, PA
Provider ID: N/A
752 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

DOUGHERTY, CLARA, PA†
Provider ID: N/A
752 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Effective as of 01-FEB-24

DU, SARAH, PA
Provider ID: N/A
577 THIRD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

GUTH, CARA, PA†
Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-24

GUTH, CARA, PA†
Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-21

INDA, PRISCILLA, PA†
Provider ID: N/A
429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†
Provider ID: N/A
429 BROADWAY
CHULA VISTA, CA 91910
Effective as of 01-JAN-24

INDA, PRISCILLA, PA
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-MAY-23

INDA, PRISCILLA, PA†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

INDA, PRISCILLA, PA†
Provider ID: N/A
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KOLODGE, KAITLEN, PA
Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-22

KOLODGE, KAITLEN, PA†
Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-AUG-23

ORTEGA-ENDAHL, DAVID, PA
Provider ID: N/A
2648 MAIN ST STE A

LEE, MYUNGHEE, PA
Provider ID: N/A
340 FOURTH AVE STE 7A
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-21

LENIHAN, MICHAEL, PA
Provider ID: N/A
955 LANE AVE STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-20

MACASADIA, MARITES, PA
Provider ID: N/A
752 MEDICAL CENTER CT STE 210
CHULA VISTA, CA 91911
Effective as of 01-SEP-20

MENDEZ, JESUS, PA†
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

NGUYEN, THUY-VY, PA†
Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-SEP-20

NGUYEN, THUY-VY, PA†
Provider ID: N/A
2300 BOSWELL RD STE 130
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-SEP-20
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<td>WILAND, WINONA, PA</td>
<td>N/A</td>
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<tr>
<td>BANKS, JAMINELLI, DPM</td>
<td>N/A</td>
<td>855 3RD AVE STE 1100</td>
<td>CHULA VISTA</td>
<td>CA</td>
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<td>01-SEP-22</td>
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</table>

Your PCP’s provider group may have its own network of mental health providers. Please refer to the list below. You can contact these providers directly. Please note that some services may require prior authorization from the mental health provider before they can be covered.

If you want to access the mental health provider list online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-APR-24

CHU, ANDREW, DPM†
Provider ID: N/A
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

COLLINS, MICHAEL, DPM†
Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

COLLINS, MICHAEL, DPM†
Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

COLLINS, MICHAEL, DPM†
Provider ID: N/A
480 4TH AVE STE 501
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-18

DAVIDSON, JOHN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

DAVIDSON, JOHN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

DAVIDSON, JOHN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-23

DAVIDSON, JOHN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

DAVIDSON, JOHN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-22

DAVIDSON, JOHN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

HAN, KYOUNG, DPM
Provider ID: N/A
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-JAN-22

KRIGER, STEPHEN, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-FEB-22

MANCHEL, BRUCE, DPM†
Provider ID: N/A
276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MAZZA, DAVID, DPM†
Provider ID: N/A
276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-DEC-22

MAZZA, DAVID, DPM†
Provider ID: N/A
276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-SEP-15

MAZZA, DAVID, DPM†
Provider ID: N/A
276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-JAN-14

MORGAN, CRAIG, DPM†
Provider ID: N/A
276 CHURCH AVE STE A
CHULA VISTA, CA 91910
Effective as of 01-DEC-17

NGUYEN, HAN, DPM
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JAN-24
C1. 網絡內提供者清單
專科護理醫師

NGUYEN, HAN, DPM
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-23

NGUYEN, HAN, DPM
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

PUCCINELLI, ALAYNA, DPM†
Provider ID: N/A
340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JUL-22

PUCCINELLI, ALAYNA, DPM†
Provider ID: N/A
340 4TH AVE STE 6
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

QUE, HOWIE, DPM
Provider ID: N/A
750 MEDICAL CENTER CT
STE 6
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

READ, TRENTON, DPM
Provider ID: N/A
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-APR-23

SMITH, COLLIN, DPM†
Provider ID: N/A
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-FEB-23

SMITH, COLLIN, DPM†
Provider ID: N/A
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Effective as of 01-SEP-22

TOUMA, ELIE, DPM
Provider ID: N/A
1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-APR-23

TOUMA, ELIE, DPM
Provider ID: N/A
1111 BROADWAY STE 305
CHULA VISTA, CA 91911
Effective as of 01-DEC-23

XU, DIXON, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

XU, DIXON, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAY-21

XU, DIXON, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-MAR-24

XU, DIXON, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-JAN-21

XU, DIXON, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-NOV-20

XU, DIXON, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

XU, DIXON, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

XU, DIXON, DPM†
Provider ID: N/A
345 F ST STE 100
CHULA VISTA, CA 91910
### C1. 網絡內提供者清單

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<th>Teleservice</th>
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C1. 網絡內提供者清單

**专科護理醫師**

- NICHOLS, ALPHONSO, MD
  - Provider ID: N/A
  - 765 MEDICAL CENTER CT
    - STE 216
    - CHULA VISTA, CA 91911
  - Teleservice
  - Effective as of 01-JUL-22

- PHAM, ALISE, DO
  - Provider ID: N/A
  - 450 FOURTH AVE
    - STE 215
    - CHULA VISTA, CA 91910
  - Teleservice
  - Effective as of 01-MAR-24

- TROYER, EMILY, MD
  - Provider ID: N/A
  - 678 3RD AVE
    - CHULA VISTA, CA 91910
  - Effective as of 01-JAN-22

- TROYER, EMILY, MD
  - Provider ID: N/A
  - 678 3RD AVE
    - CHULA VISTA, CA 91910
  - Effective as of 01-JAN-22

**PSYCHIATRY CHILD**

- KARIPPOT, ANOOP, MD
  - Provider ID: N/A
  - 765 MEDICAL CENTER CT
    - STE 216
    - CHULA VISTA, CA 91911
  - Teleservice
  - Effective as of 01-JUL-22

- KARIPPOT, ANOOP, MD
  - Provider ID: N/A
  - 765 MEDICAL CENTER CT
    - STE 216
    - CHULA VISTA, CA 91911
  - Teleservice
  - Effective as of 01-MAR-24

- KARIPPOT, ANOOP, MD
  - Provider ID: N/A
  - 765 MEDICAL CENTER CT
    - STE 216
    - CHULA VISTA, CA 91911
  - Teleservice
  - Effective as of 01-JUN-22

- MISHRA, GAURAV, MD
  - Provider ID: N/A
  - 678 3RD AVE
    - CHULA VISTA, CA 91910
  - Effective as of 01-JAN-22

- MISHRA, GAURAV, MD
  - Provider ID: N/A
  - 678 3RD AVE
    - CHULA VISTA, CA 91910
  - Effective as of 01-JAN-21

- MISHRA, GAURAV, MD
  - Provider ID: N/A
  - 678 3RD AVE
    - CHULA VISTA, CA 91910
  - Effective as of 01-JAN-22

**PSYCHOLOGIST**

- BAYLON, ALDO, PSYD
  - Provider ID: N/A
  - 678 3RD AVE
    - CHULA VISTA, CA 91910
  - Effective as of 01-JAN-22

- BAYLON, ALDO, PSYD
  - Provider ID: N/A
  - 678 3RD AVE
    - CHULA VISTA, CA 91910
  - Effective as of 01-JAN-22

- CELAYA, PATRICIA, PhD
  - Provider ID: N/A
  - 678 3RD AVE
    - CHULA VISTA, CA 91910
  - Effective as of 01-JAN-22
C1. 網絡內提供者清單

專科護理醫師

Teleservice
Effective as of 01-AUG-22

CELAYA, PATRICIA, PhD†
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-AUG-22

GALLO, LINDA, PhD
Provider ID: N/A
780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Effective as of 01-APR-23

GALLO, LINDA, PhD
Provider ID: N/A
780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Effective as of 01-APR-23

GOULD, HILARY, PhD†
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-23

GOULD, HILARY, PhD†
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-23

MAPLES, RANDI, PSYD†
Provider ID: N/A
765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

MAPLES, RANDI, PSYD†
Provider ID: N/A
765 3RD AVE STE 100
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

PATTERSON-HYATT, KIMBERLY, PSYD†
Provider ID: N/A
1061 TIERRA DEL REY STE 305
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

WIJAYARATNE, IMANIE, PSYD†
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-23

WIJAYARATNE, IMANIE, PSYD†
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-23

PULMONARY DISEASES

LIRA, JOSE, MD†
Provider ID: N/A
841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-SEP-22

LIRA, JOSE, MD†
Provider ID: N/A
841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-24

LIRA, JOSE, MD†
Provider ID: N/A
841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-JAN-14

LIRA, JOSE, MD†
Provider ID: N/A
841 KUHN DR STE 200
CHULA VISTA, CA 91914
Effective as of 01-FEB-21
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*Note: The providers listed above are from Blue Shield's network. Please consult your address and contact the provider directly. Some services may require prior authorization from Blue Shield.*
C1. 網絡內提供者清單

專科護理醫師

CHULA VISTA, CA 91914
Teleservice
Effective as of 01-DEC-21

UHL, BARRY, MD†
Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JAN-21

VOLPP, PAUL, MD†
Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

VOLPP, PAUL, MD²
Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD†
Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD²
Provider ID: N/A
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Effective as of 01-JAN-21

WHITE, EVAN, MD†
Provider ID: N/A
959 LANE AVE
CHULA VISTA, CA 91914
Teleservice
Effective as of 01-APR-21

RADIOLOGY DIAGNOSTIC

YORK, JOHN, MD
Provider ID: N/A
865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-JUN-23

YORK, JOHN, MD
Provider ID: N/A
865 3RD AVE STE 100
CHULA VISTA, CA 91911
Effective as of 01-DEC-23

REGISTERED PHYSICAL

THERAPEUTIST

ALLOS, ALEXANDER, PT†
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

BURLAKOVSKY, NATHAN, PT
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

CHENG, BRANDON, PT
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

DAGOSTINO, JACQUELINE, PT†
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

DORSEY, KYLE, PT†
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-JAN-21

DORSEY, KYLE, PT²
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

FARRAR, COURTNEY, PT
Provider ID: N/A
340 FOURTH AVE
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-DEC-23

HERMAN, RACHEL, PT†
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-JUL-22

HERMAN, RACHEL, PT²
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-JUL-22

JAIN, ALEXANDRA, PT
Provider ID: N/A
880 THIRD AVE
STE A
CHULA VISTA, CA 91911
Effective as of 01-MAR-24

KARANDE, PRACHI, PT†
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-JAN-22

LONG, RYAN, PT
Provider ID: N/A
320 BROADWAY STE 2
CHULA VISTA, CA 91910
Effective as of 01-JUL-22

LONG, RYAN, PT
Provider ID: N/A
2417 FENTON ST STE A
CHULA VISTA, CA 91914
Effective as of 01-JUL-22
C1. 網絡內提供者清單

網路內提供者清單

專科護理醫師

NGUYEN, TIA, PT
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-MAR-24

NOVENCIDO, ANDREW, PT
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-SEP-22

PAPA, AMY, PT
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-21

PHILLIP, OMARI, PT
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-AUG-23

POLIS, NICK, PT
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-MAY-22

SPARKS, TODD, PT
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-JAN-21

STAHL, KEVIN, PT
Provider ID: N/A
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Effective as of 01-SEP-23

THOMAS, KAITLIN, PT
Provider ID: N/A
88 E BONITA RD STE C
CHULA VISTA, CA 91910
Effective as of 01-NOV-23

RHEUMATOLOGY

AL NAHLAWI, BASMA, MD
Provider ID: N/A
296 H ST STE 304
CHULA VISTA, CA 91910
Teleservice
Effective as of 01-SEP-22

CHITKARA, PUJA, MD
Provider ID: N/A
765 MEDICAL CENTER CT STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-SEP-22

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS, SP
Provider ID: N/A
333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUN-23

HAMMET, ERIN, DO
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

KHANNA, SURABHI, MD
Provider ID: N/A
765 MEDICAL CENTER CT STE 216
CHULA VISTA, CA 91911
Teleservice
Effective as of 01-JUN-23

REDDY, DANA, MD
Provider ID: N/A
678 3RD AVE
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

REDDY, SMITHA, MD
Provider ID: N/A
272 CHURCH AVE STE 1
CHULA VISTA, CA 91910
Effective as of 01-FEB-19

AROCHO-SALGADO, MIRELIS, SP
Provider ID: N/A
333 H ST STE 5000
CHULA VISTA, CA 91910
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP
Provider ID: N/A
333 H ST STE 5000
CHULA VISTA, CA 91910

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
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<td><strong>CALDERON MORALES, ASTRID, SP</strong></td>
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<td>333 H ST STE 5000 CHULA VISTA, CA 91910</td>
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<td><strong>SURGERY GENERAL</strong></td>
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<td>ARCOVEDO, RODOLFO, MD†</td>
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<td>01-AUG-23</td>
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<td>CASILLAS BERUMEN, SERGIO, MD</td>
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<td>1111 BROADWAY STE 305 CHULA VISTA, CA 91911</td>
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<td><strong>CASILLAS BERUMEN, SERGIO, MD</strong></td>
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<td><strong>EWEBANK, CLIFTON, MD†</strong></td>
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<td><strong>HSU, ANDREW, MD†</strong></td>
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<td>480 4TH AVE STE 404 CHULA VISTA, CA 91910</td>
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<td><strong>BARRERA, HUGO, MD†</strong></td>
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C1. 網絡內提供者清單
專科護理醫師

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<td>MOLDOVAN, STEFAN, MD†</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
### C1. 網絡內提供者清單

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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
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<thead>
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*Your PCP's network may have its own network of mental health providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require prior authorization from the provider before they can be covered.

To access the mental health provider list online, please visit [blueshieldca.com/fad](http://blueshieldca.com/fad).
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C1. 網絡內提供者清單
專科護理醫師

NGUYEN, HUNG, MD
Provider ID: N/A
752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
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PE, MARK-RALLY, MD
Provider ID: N/A
752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

ROBERTS, JAMES, MD
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CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SALEM, CAROL, MD
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Effective as of 01-JAN-24

SALMASI, AMIRALI, MD
Provider ID: N/A
752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD†
Provider ID: N/A
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STE 101
CHULA VISTA, CA 91911
Effective as of 01-JAN-24

SANTOMAURO, MICHAEL, MD†
Provider ID: N/A
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STE 101
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Effective as of 01-NOV-21

SEVILLA, CLAUDIA, MD†
Provider ID: N/A
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Effective as of 01-MAY-21

SEVILLA, CLAUDIA, MD†
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SEVILLA, CLAUDIA, MD†
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750 MEDICAL CENTER CT
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Teleservice
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VAPNEK, EVAN, MD†
Provider ID: N/A
786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-JAN-21

VAPNEK, EVAN, MD†
Provider ID: N/A
786 3RD AVE STE B
CHULA VISTA, CA 91910
Effective as of 01-MAR-24

RESTREPO, DALILAH, MD†
Provider ID: N/A
3334 E COAST HWY PMB 655
### C1. 網絡內提供者清單

**專科護理醫師**

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<td>Davis, Jason, MD</td>
<td>N/A</td>
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<td>N/A</td>
<td>230 Prospect Pl STE 210</td>
<td>01-JAN-24</td>
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<td>N/A</td>
<td>230 Prospect Pl STE 210</td>
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* Your PCP’s provider network may have network providers for mental health services. Please see the list below. You can contact these providers directly. Some services may require prior authorization from the mental health service provider before they can be covered.

For an online list of mental health service providers, please visit [blueshieldca.com/fad](http://blueshieldca.com/fad).
C1. 網絡內提供者清單
専科護理醫師

SEFA-BOAKYE, KOFI, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JUL-14

PHYSICIANS ASSISTANT
DOUGHERTY, CLARA, PA
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

SURGERY GENERAL
BHOYRUL, SUNIL, MD
Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

BORTZ, PASCAL, MD
Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-22

MORELL, MICHAEL, MD
Provider ID: N/A
230 PROSPECT PL STE 340
CORONADO, CA 92118
Effective as of 01-DEC-23

SURGERY ORTHOPEDIC
ANDRY, JAMES, MD
Provider ID: N/A
230 PROSPECT PL STE 230
CORONADO, CA 92118
Effective as of 01-MAR-24

KUSNEZOV, NICHOLAS, MD
Provider ID: N/A
230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

MCKNIGHT, BRADEN, MD
Provider ID: N/A
230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD
Provider ID: N/A
230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD
Provider ID: N/A
230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

PALLIA, CHRISTOPHER, MD
Provider ID: N/A
230 PROSPECT PL STE 230
CORONADO, CA 92118
Teleservice
Effective as of 01-APR-24

UROLOGY
BUTLER, PHILIP, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

COHEN, EDWARD, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

COHEN, EDWARD, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

DICKS, BRIAN, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

JUMA, SAAD, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

KEILLER, DANNY, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

NGUYEN, HUNG, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

PE, MARK-RALLY, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

ROBERTS, JAMES, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

ROBERTS, JAMES, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-21

SALEM, CAROL, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-20

SALMASI, AMIRALI, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

VAPNEK, EVAN, MD
Provider ID: N/A
230 PROSPECT PL STE 210
CORONADO, CA 92118
Effective as of 01-JAN-24

CERTIFIED NURSE PRACTITIONER

PASICOLAN, MARI, NP
Provider ID: N/A
24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

PASCOALAN, MARI, NP
Provider ID: N/A
24833 DEL PRADO
DANA POINT, CA 92629
Effective as of 01-DEC-22

Effective as of 01-OCT-23

PHYSICIANS ASSISTANT

JEFFREY, JAMES, PA
Provider ID: N/A
24060 CAMINO DEL AVION STE A
DANA POINT, CA 92629
Effective as of 01-NOV-23

PSYCHOLOGIST

UNGER, ARLENE, PhD
Provider ID: N/A
34145 PACIFIC COAST HWY STE 821
DANA POINT, CA 92629
Effective as of 01-DEC-20

DERMATOLOGY

MARRIOTT, AGATA, MD
Provider ID: N/A
24692 DEL PRADO STE B
DANA POINT, CA 92629
Effective as of 01-DEC-20

Your PCP's doctor group may have their own network mental health service providers. Please refer to the below list. You can directly contact these providers. Please note, certain services may require mental health service providers to obtain Blue Shield prior authorization before the service can be covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
### Physicians Assistant

**Hansen, Christina, PA**  
Provider ID: N/A  
1349 Camino Del Mar  
Ste D  
Del Mar, CA 92014  
TeleService  
Effective as of 01-SEP-22

**Lee, Isabel, PA**  
Provider ID: N/A  
12865 Pointe Del Mar  
Way Ste 200  
Del Mar, CA 92014  
TeleService  
Effective as of 01-OCT-23

**Szabo, Haylie, PA**  
Provider ID: N/A  
12865 Pointe Del Mar  
Way Ste 200  
Del Mar, CA 92014  
TeleService  
Effective as of 01-OCT-23

### Psychiatry

**Cologne, Scott, MD†**  
Provider ID: N/A  
12865 Pointe Del Mar  
Way Ste 210  
Del Mar, CA 92014  
Effective as of 01-OCT-23

**Cologne, Scott, MD†**  
Provider ID: N/A  
12865 Pointe Del Mar  
Way Ste 210  
Del Mar, CA 92014  
Effective as of 01-OCT-23

**Vijayasarathi, Krishna, DO†**  
Provider ID: N/A  
12835 Pointe Del Mar  
Way Ste 1  
Del Mar, CA 92014  
Effective as of 01-OCT-23

**Vijayasarathi, Krishna, DO†**  
Provider ID: N/A  
12835 Pointe Del Mar  
Way Ste 1  
Del Mar, CA 92014  
Effective as of 01-OCT-23

**Vijayasarathi, Krishna, DO†**  
Provider ID: N/A  
12835 Pointe Del Mar  
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Del Mar, CA 92014  
Effective as of 01-OCT-23

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12835 Pointe Del Mar  
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12835 Pointe Del Mar  
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Effective as of 01-OCT-23

**Vijayasarathi, Krishna, DO†**  
Provider ID: N/A  
12835 Pointe Del Mar  
Way Ste 1  
Del Mar, CA 92014*  
Effective as of 01-OCT-23

**Rosengarten, Arthur, PhD†**  
Provider ID: N/A  
12835 Pointe Del Mar  
Way Ste 1  
Del Mar, CA 92014  
Effective as of 01-OCT-23

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Del Mar, CA 92014*  
Effective as of 01-OCT-23

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Effective as of 01-OCT-23

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12835 Pointe Del Mar  
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Way Ste 1  
Del Mar, CA 92014*  
Effective as of 01-OCT-23

**Rosengarten, Arthur, PhD†**  
Provider ID: N/A  
12835 Pointe Del Mar  
Way Ste 1  
Del Mar, CA 92014*  
Effective as of 01-OCT-23
ROSENGARTEN, ARTHUR, PhD
Provider ID: N/A
12865 POINTE DEL MAR WAY STE 210
DEL MAR, CA 92014*
Effective as of 01-MAY-23

ROSENGARTEN, ARTHUR, PhD†
Provider ID: N/A
12835 POINTE DEL MAR WAY STE 1
DEL MAR, CA 92014*
Effective as of 01-OCT-23

ROSENGARTEN, ARTHUR, PhD†
Provider ID: N/A
12835 POINTE DEL MAR WAY STE 1
DEL MAR, CA 92014
Effective as of 01-OCT-23

SURGERY ORTHOPEDIC
BROWN, RICHARD, MD†
Provider ID: N/A
12865 POINTE DEL MAR WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

MOHLENBROCK, WILLIAM, MD
Provider ID: N/A
12865 POINTE DEL MAR WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

THUNDER, RICHARD, MD†
Provider ID: N/A
12865 POINTE DEL MAR WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

WAY STE 200
DEL MAR, CA 92014
Teleservice
Effective as of 01-JAN-22

CARDIOVASCULAR DISEASE
ABELHAD, NADIA, MD
Provider ID: N/A
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-24

BARVALIA, MIHIR, MD†
Provider ID: N/A
1380 EL CAJON BLVD STE 212
EL CAJON, CA 92020
Teleservice
Effective as of 01-OCT-22

BARVALIA, MIHIR, MD†
Provider ID: N/A
1380 EL CAJON BLVD STE 100
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-21

CARLSON, STEVEN, MD†
Provider ID: N/A
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Teleservice
Effective as of 01-APR-21

DO, HULBERT, MD
Provider ID: N/A
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-OCT-23

FERNANDEZ, GENARO, MD†
Provider ID: N/A
1380 EL CAJON BLVD STE 100
EL CAJON, CA 92020
Effective as of 01-AUG-21

ANESTHESIOLOGY PAIN MANAGEMENT
COHEN, ZACHARY, MD†
Provider ID: N/A
278 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-NOV-21

AUDIOLOGIST
HORNER, HEATHER, AuD†
Provider ID: N/A
1767 E MAIN ST
EL CAJON, CA 92021
Teleservice
Effective as of 01-JUN-22

SHASKY, GARY, AuD†
Provider ID: N/A
1767 E MAIN ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

CARDIAC ELECTROPHYSIOLOGY
LERNER, JONATHAN, MD
Provider ID: N/A
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†
Provider ID: N/A
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-JAN-23
### C1. 網絡內提供者清單

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<th>專科護理醫師</th>
<th>專家</th>
<th>專家 ID</th>
<th>專家地址</th>
<th>效力日期</th>
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<td>專家</td>
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<td>效力日期為01-APR-21</td>
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<td>KAFRI, HASSAN, MD†</td>
<td>專家</td>
<td>328 HIGHLAND AVE STE 200 EL CAJON, CA 92020</td>
<td>效力日期為01-AUG-20</td>
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<td>MOHAMEDALI, BURHAN, MD†</td>
<td>專家</td>
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<td>效力日期為01-SEP-22</td>
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<td>專家</td>
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<td>NAGHI, JESSE, MD†</td>
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<td>NARAYANAN, MEENA, MD†</td>
<td>專家</td>
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<td>NISHIMURA, MARIN, MD</td>
<td>專家</td>
<td>300 S PIERCE ST STE 102 EL CAJON, CA 92020 Teleservice 效力日期為01-MAR-23</td>
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<td>OMRAN, JAD, MD†</td>
<td>專家</td>
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<td>PARikh, milind, DO†</td>
<td>專家</td>
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<td>效力日期為01-SEP-22</td>
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<td>PONCE, SONIA, MD†</td>
<td>專家</td>
<td>328 HIGHLAND AVE STE 200 EL CAJON, CA 92020 Teleservice</td>
<td>效力日期為01-SEP-22</td>
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<td>SARSAM, LUAY, MD</td>
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<td>效力日期為01-JUL-23</td>
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<td>SARSAM, LUAY, MD</td>
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<td>SHAh, ABHISHEK, MD†</td>
<td>專家</td>
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<tr>
<td>SHAh, KULIN, MD†</td>
<td>專家</td>
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<td>效力日期為01-JAN-23</td>
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<tr>
<td>SHEREV, DIMITRI, MD†</td>
<td>專家</td>
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<td>效力日期為01-AUG-21</td>
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<tr>
<td>SUDHAKAR, DEEPTHI, MD†</td>
<td>專家</td>
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<td>效力日期為01-JAN-23</td>
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<tr>
<td>YAU, STEPHEN, MD†</td>
<td>專家</td>
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<tr>
<td>YAU, STEPHEN, MD†</td>
<td>專家</td>
<td>328 HIGHLAND AVE STE 200 EL CAJON, CA 92020</td>
<td>效力日期為01-JUL-23</td>
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</tbody>
</table>
C1. 網絡內提供者清單

網絡內提供者清單

專科護理醫師

Teleservice
Effective as of 01-AUG-22

ZAVARO, SUHAIL, MD†
Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-21

SLOAN, ERICA, LAC
Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-MAR-24

CERTIFIED
ACUPUNCTURIST

LAROWE, ALEXISS, LAC
Provider ID: N/A

470 N MOLLISON AVE
EL CAJON, CA 92021
Effective as of 01-MAY-23

LAROWE, ALEXISS, LAC
Provider ID: N/A

470 N MOLLISON AVE
EL CAJON, CA 92021
Effective as of 01-JAN-21

LAROWE, ALEXISS, LAC†
Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-21

LAROWE, ALEXISS, LAC†
Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JUL-21

CERTIFIED NURSE
PRACTITIONER

BRANNEN, MANDY, NP†
Provider ID: N/A

215 W MADISON AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-OCT-23

CARDENAS, MIRIAM, NPF
Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-JAN-21

CHUDACEK, JANET, NP†
Provider ID: N/A

215 W MADISON AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-JAN-21

JOHNSON, KIMBERLY, NP†
Provider ID: N/A

328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
Teleservice
Effective as of 01-AUG-21

LUCKETT, DE COURCY, NP†
Provider ID: N/A

1580 N 2ND ST
EL CAJON, CA 92021
Effective as of 01-JAN-21

MAYOYO, MARILYNN, NP
Provider ID: N/A

300 S PIERCE ST STE 102
EL CAJON, CA 92020
Effective as of 01-MAY-23

MURRAY, CARLA, NP
Provider ID: N/A

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-24

PIRTLE, KEYSHONE, NP†
Provider ID: N/A

5442 SYCUAN RD
EL CAJON, CA 92019
Effective as of 01-SEP-21

REAL, MARIA, NP
Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

REDDY, PRIYA, NP
Provider ID: N/A

1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-NOV-22

RENZAS, JENNIFER, NP
Provider ID: N/A

165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-JUL-21

RENZAS, JENNIFER, NP
Provider ID: N/A

1032 BROADWAY
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<td>WILLIAMS, BREAHNA, NP</td>
<td>Provider ID: N/A</td>
<td>165 S 1ST ST</td>
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<td>YALDO, ATHMAR, NP²</td>
<td>Provider ID: N/A</td>
<td>328 HIGHLAND AVE STE 200</td>
<td>01-OCT-23</td>
</tr>
<tr>
<td>HAMMOND, HEATHER, CRNM†</td>
<td>Provider ID: N/A</td>
<td>855 E MADISON AVE</td>
<td>01-JUL-21</td>
</tr>
<tr>
<td>HAMMOND, HEATHER, CRNM†</td>
<td>Provider ID: N/A</td>
<td>855 E MADISON AVE</td>
<td>01-JUL-21</td>
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<tr>
<td>CHIROPRACTOR</td>
<td></td>
<td>1032 BROADWAY</td>
<td>01-OCT-23</td>
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<tr>
<td>DORADO, SUE, DC</td>
<td>Provider ID: N/A</td>
<td>165 S 1ST ST</td>
<td>01-OCT-23</td>
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<td>FULKS, ZACKARY, DC</td>
<td>Provider ID: N/A</td>
<td>855 E MADISON AVE</td>
<td>01-MAY-23</td>
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<td>HALEY, STEVEN, DC</td>
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<td>01-OCT-23</td>
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<td>HALEY, STEVEN, DC</td>
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<td>01-OCT-23</td>
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<td>MANSOUR, RASHAD, DC</td>
<td>Provider ID: N/A</td>
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<td>01-MAY-23</td>
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<tr>
<td>MCCOWN, BARRY, DC</td>
<td>Provider ID: N/A</td>
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<td>01-APR-24</td>
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<tr>
<td>MCCOWN, BARRY, DC</td>
<td>Provider ID: N/A</td>
<td>222 W MADISON AVE</td>
<td>01-MAR-24</td>
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<tr>
<td>MCCOWN, BARRY, DC</td>
<td>Provider ID: N/A</td>
<td>292 AVOCADO AVE</td>
<td>01-OCT-21</td>
</tr>
<tr>
<td>BROGAN, JACQUELINE, MD†</td>
<td>Provider ID: N/A</td>
<td>292 AVOCADO AVE</td>
<td>01-OCT-21</td>
</tr>
<tr>
<td>BROGAN, JACQUELINE, MD†</td>
<td>Provider ID: N/A</td>
<td>292 AVOCADO AVE</td>
<td>01-OCT-21</td>
</tr>
</tbody>
</table>
C1. 網絡內提供者清單

專科護理醫師

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Effective Date</th>
<th>Provider ID</th>
</tr>
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<tbody>
<tr>
<td>CELANO, NICHOLAS, MD</td>
<td>292 AVOCADO AVE EL CAJON, CA 92020</td>
<td>01-JUL-22</td>
<td>N/A</td>
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<tr>
<td>CHIANG, JENNIFER, MD</td>
<td>292 AVOCADO AVE EL CAJON, CA 92020</td>
<td>01-MAR-18</td>
<td>N/A</td>
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<tr>
<td>GONZALEZ, JOSE, MD</td>
<td>292 AVOCADO AVE EL CAJON, CA 92020</td>
<td>01-MAY-23</td>
<td>N/A</td>
</tr>
<tr>
<td>GONZALEZ, JOSE, MD</td>
<td>292 AVOCADO AVE EL CAJON, CA 92020</td>
<td>01-AUG-22</td>
<td>N/A</td>
</tr>
<tr>
<td>GORDON, JUSTIN, MD</td>
<td>292 AVOCADO AVE EL CAJON, CA 92020</td>
<td>01-MAR-24</td>
<td>N/A</td>
</tr>
<tr>
<td>HANSEN, DOYLE, MD</td>
<td>1679 E MAIN ST STE 208 EL CAJON, CA 92021</td>
<td>01-JAN-14</td>
<td>N/A</td>
</tr>
<tr>
<td>KASSAB, GHADA, MD</td>
<td>624 EL CAJON BLVD EL CAJON, CA 92020</td>
<td>01-JUL-23</td>
<td>N/A</td>
</tr>
<tr>
<td>KASSAB, GHADA, MD</td>
<td>330 S MAGNOLIA AVE EL CAJON, CA 92020</td>
<td>01-JAN-21</td>
<td>N/A</td>
</tr>
<tr>
<td>LIN, SHINKO, MD</td>
<td>292 AVOCADO AVE EL CAJON, CA 92020</td>
<td>01-APR-24</td>
<td>N/A</td>
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<tr>
<td>SATEESH, BROOKE, MD</td>
<td>222 W MADISON AVE EL CAJON, CA 92020</td>
<td>01-MAR-16</td>
<td>N/A</td>
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<tr>
<td>SATEESH, BROOKE, MD</td>
<td>222 W MADISON AVE EL CAJON, CA 92020</td>
<td>01-APR-24</td>
<td>N/A</td>
</tr>
<tr>
<td>SATEESH, BROOKE, MD</td>
<td>222 W MADISON AVE EL CAJON, CA 92020</td>
<td>01-APR-24</td>
<td>N/A</td>
</tr>
</tbody>
</table>
C1. 網絡內提供者清單

專科護理醫師

TYAGI, ABHILASHA, MD
Provider ID: N/A
292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-AUG-22

TYAGI, ABHILASHA, MD
Provider ID: N/A
222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

UEBELHOER, NATHAN, DO
Provider ID: N/A
222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

UEBELHOER, NATHAN, DO†
Provider ID: N/A
292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-DEC-20

HASSANEIN, TAREK, MD†
Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Effective as of 01-SEP-22

NOVO, MEGAN, MD
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-MAY-23

SCHAEFFER, CYNTHIA, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

THOMAS, CARLTON, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-21

GASTROENTEROLOGY

CUBAS, IVAN, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

DESTA, TADDESE, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-APR-24

NOVO, MEGAN, MD
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-MAY-23

SCHAEFFER, CYNTHIA, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

THOMAS, CARLTON, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-21

EMERGENCY MEDICINE

YAU, STEPHEN, MD†
Provider ID: N/A
328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
Teleservice
Effective as of 01-APR-23

SCHAEFFER, CYNTHIA, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-MAY-23

THOMAS, CARLTON, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-21

FAMILY PRACTICE

SHAFT, ALEXANDER, MD†
Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Effective as of 01-DEC-20

HASSANEIN, TAREK, MD†
Provider ID: N/A
463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-SEP-22

NOVO, MEGAN, MD
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-MAY-23

SCHAEFFER, CYNTHIA, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-18

THOMAS, CARLTON, MD†
Provider ID: N/A
2732 NAVAJO RD STE 200
EL CAJON, CA 92020
Effective as of 01-JUL-21

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-21

TYAGI, ABHILASHA, MD†
Provider ID: N/A
292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

TYAGI, ABHILASHA, MD†
Provider ID: N/A
292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-22

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-FEB-22

222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-AUG-22

292 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-APR-22

222 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-APR-24

463 N MAGNOLIA AVE
EL CAJON, CA 92020
Teleservice
Effective as of 01-SEP-22
C1. 網絡內提供者清單

专科護理醫師

EL CAJON, CA 92020
Effective as of 01-JUL-18

GENERAL PRACTICE

ALSHAMMARY, MOHAMMED, MD
Provider ID: N/A
ıc 855 E MADISON AVE
EL CAJON, CA 92020* Effective as of 01-MAY-23

MANSOUR, DAVID, DO†
Provider ID: N/A
ıc 855 E MADISON AVE
EL CAJON, CA 92020* Effective as of 01-AUG-22

MAY, LOUIS, MD†
Provider ID: N/A
ıc 875 EL CAJON BLVD
EL CAJON, CA 92020 Effective as of 01-SEP-22

DANDURAND, JOHN, MA†
Provider ID: N/A
ıc 1767 E MAIN ST
EL CAJON, CA 92021 Effective as of 01-SEP-22

DAVIS, KELLE, MA†
Provider ID: N/A
ıc 1767 E MAIN ST
EL CAJON, CA 92021 Effective as of 01-SEP-22

DAVIS, KELLE, MA†
Provider ID: N/A
ıc 1767 E MAIN ST
EL CAJON, CA 92021 Effective as of 01-SEP-22

INTERNAL MEDICINE

AWDISHO, ALAN, DO†
Provider ID: N/A

OLIVER, DEANNA, MD†
Provider ID: N/A
ıc 463 N MAGNOLIA AVE
EL CAJON, CA 92020 Effective as of 01-MAR-21

OLIVER, DEANNA, MD†
Provider ID: N/A
ıc 463 N MAGNOLIA AVE
EL CAJON, CA 92020 Effective as of 01-OCT-22

INTERVENTIONAL CARDIOLOGY

BARVALIA, MIHIR, MD†
Provider ID: N/A
ıc 1380 EL CAJON BLVD STE 100
EL CAJON, CA 92020 Effective as of 01-SEP-22

KAFRI, HASSAN, MD†
Provider ID: N/A
ıc 328 HIGHLAND AVE STE 200
EL CAJON, CA 92020 Effective as of 01-SEP-22

NAGHI, JESSE, MD†
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
1380 EL CAJON BLVD STE 100
EL CAJON, CA 92020
Effective as of 01-JAN-24

PONCE, SONIA, MD†
Provider ID: N/A
328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-21

RUBIO GARCIA, MANOLO, MD†
Provider ID: N/A
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-DEC-22

SHAH, KULIN, MD†
Provider ID: N/A
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Effective as of 01-APR-23

SHARF, ALBERT, MD
Provider ID: N/A
1240 BROADWAY STE 210
EL CAJON, CA 92021
Effective as of 01-JAN-24

SHARF, ALBERT, MD
Provider ID: N/A
230 AVOCADO AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

SHEREV, DIMITRI, MD
Provider ID: N/A
1380 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JAN-24

SUDHAKAR, DEEPTHI, MD†
Provider ID: N/A

Licensed Clinical Social Worker

FRAGOSO, DOMINIQUE, LCSW
Provider ID: N/A
215 W MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

ORLANDO, FRANCESCA, LCSW
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-FEB-23

TAYLOR, MISTY, LCSW
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-SEP-22

Marriage Family Therapist

ARNOLD, REBECCA, MFT
Provider ID: N/A
855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-FEB-24

Estavillo, Saul, MFT
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-23

Obstetrics / Gynecology

AL-MSHHDANI, AYSER, MD
Provider ID: N/A
1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

AL-MSHHDANI, AYSER, MD
Provider ID: N/A
165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

Bulloch, Edgar, MD†
Provider ID: N/A
133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-JUN-22

Davis, Tracie, MD
Provider ID: N/A
165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-OCT-23

Davis, Tracie, MD
Provider ID: N/A
1032 BROADWAY
EL CAJON, CA 92021
Teleservice
C1. 網絡內提供者清單

专科護理醫師

Effective as of 01-OCT-23

FOLCH TORRES-AGUIAR, BEATRIZ, MD†
Provider ID: N/A
1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-AUG-22

FOLCH TORRES-AGUIAR, BEATRIZ, MD†
Provider ID: N/A
165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-AUG-22

GELLENS, ANDREW, MD†
Provider ID: N/A
165 S 1ST ST
EL CAJON, CA 92019
Teleservice
Effective as of 01-NOV-21

GELLENS, ANDREW, MD†
Provider ID: N/A
1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-NOV-21

SEAVEY, MICHELLE, MD
Provider ID: N/A
855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-23

TAJRAN, DEENA, MD†
Provider ID: N/A
291 E LEXINGTON AVE STE AC
EL CAJON, CA 92020
Effective as of 01-JAN-21

OPHTHALMOLOGY

ABDALLAH, WALID, MD
Provider ID: N/A
231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-FEB-24

BINDER, NICHOLAS, MD
Provider ID: N/A
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-FEB-24

BINDER, NICHOLAS, MD
Provider ID: N/A
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

BINDER, NICHOLAS, MD
Provider ID: N/A
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-NOV-23

BOECKMANN, JESSICA, MD†
Provider ID: N/A
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-JAN-21

HSU, CHRISTOPHER, MD
Provider ID: N/A
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-DEC-23

HSU, CHRISTOPHER, MD†
Provider ID: N/A
225 W MADISON AVE STE 1
EL CAJON, CA 92020
Effective as of 01-SEP-22

MANI, NASRIN, MD†
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

MCDONNELL, EMMA, MD†
Provider ID: N/A
231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-NOV-22

PATEL, GITANE, MD
Provider ID: N/A
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-NOV-23

PATEL, GITANE, MD
Provider ID: N/A
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-24

PATEL, SARJAN, MD
Provider ID: N/A
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-24

PATEL, GITANE, MD
Provider ID: N/A
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23
C1. 網絡內提供者清單

専科護理醫師

PATEL, SARJAN, MD
Provider ID: N/A
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-DEC-23

ZHAO, TAILUN, MD
Provider ID: N/A
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-NOV-23

KHALIL, VADY, OD
Provider ID: N/A
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-DEC-23

PONS, MAURICIO, MD
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-JUL-22

ZHAO, TAILUN, MD
Provider ID: N/A
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-24

PONS, MAURICIO, MD
Provider ID: N/A
231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-AUG-22

OPTOMETRIST

AOTO, KIM, OD
Provider ID: N/A
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-SEP-22

KHALIL, VADY, OD
Provider ID: N/A
231 W MAIN ST
EL CAJON, CA 92020
Effective as of 01-FEB-24

PRABHU, SUJATA, MD
Provider ID: N/A
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-NOV-23

DYER, SHARON, OD
Provider ID: N/A
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020
Effective as of 01-DEC-23

DYER, SHARON, OD
Provider ID: N/A
225 W MADISON AVE STE 1
EL CAJON, CA 92020
Effective as of 01-SEP-22

HAN, SUL KI, OD
Provider ID: N/A
450 FLETCHER PKWY STE 112
EL CAJON, CA 92020

PHYSICIANS ASSISTANT

ALYAS, ALISIA, PA
Provider ID: N/A
165 S 1ST ST
EL CAJON, CA 92019
C1. 網絡內提供者清單
専科護理醫師

Teleservice
Effective as of 01-JUN-21

ALYAS, ALISIA, PA
Provider ID: N/A
1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-JUN-21

HABBOUSH, RANA, PA
Provider ID: N/A
1032 BROADWAY
EL CAJON, CA 92021
Teleservice
Effective as of 01-OCT-23

INDA, PRISCILLA, PA†
Provider ID: N/A
328 HIGHLAND AVE STE 200
EL CAJON, CA 92020
Effective as of 01-JAN-21

KURZ, TROY, MD†
Provider ID: N/A
133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-JAN-24

MATIALEU, LEOPOLDINE, MD
Provider ID: N/A
855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

PODIATRIST

FARMER, STEVEN, DPM†
Provider ID: N/A
855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

PSYCHIATRY

DIA, ALI, MD†
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-DEC-22

DIA, ALI, MD†
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Teleservice
Effective as of 01-DEC-22

KURZ, TROY, MD†
Provider ID: N/A
133 W MAIN ST STE 100
EL CAJON, CA 92020
Effective as of 01-OCT-22

MATIALEU, LEOPOLDINE, MD
Provider ID: N/A
855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

POSTLETHWAITE, ALEJANDRA, MD†
Provider ID: N/A
855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-DEC-22

POSTLETHWAITE, ALEJANDRA, MD†
Provider ID: N/A
855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24
C1. 網絡內提供者清單

網絡內提供者清單

855 E MADISON AVE
EL CAJON, CA 92020
Effective as of 01-JAN-24

SADDA, REEM, MD
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

SADDA, REEM, MD
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-MAR-24

PSYCHOLOGIST

ARAIZA, ERNESTINA, PSYD†
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-21

ARAIZA, ERNESTINA, PSYD†
Provider ID: N/A
875 EL CAJON BLVD
EL CAJON, CA 92020
Effective as of 01-AUG-21

RADIOLOGY DIAGNOSTIC

MOSHFEGH, AMIEL, MD†
Provider ID: N/A
463 N MAGNOLIA AVE STE B
EL CAJON, CA 92020
Effective as of 01-SEP-22

REGISTERED PHYSICAL THERAPIST

DASCENZO, EMILY, PT†
Provider ID: N/A
875 EL CAJON BLVD

EL CAJON, CA 92020
Teleservice
Effective as of 01-JUL-22

LONG, RYAN, PT
Provider ID: N/A
181 JAMACHA RD
EL CAJON, CA 92019†
Effective as of 01-JUL-22

SURGERY ORTHOPEDIC

NOURI, LABEED, MD
Provider ID: N/A
330 S MAGNOLIA AVE STE 302
EL CAJON, CA 92020
Effective as of 01-JAN-21

CERTIFIED NURSE PRACTITIONER

TORIOLA, ABIODUN, NP
Provider ID: N/A
24432 MUIRLANDS BLVD STE 131
EL TORO, CA 92630
Effective as of 01-JUL-23

ANESTHESIOLOGY PAIN MANAGEMENT

DAIRO, BRANDON, MD†
Provider ID: N/A
477 N EL CAMINO REAL STE B301
ENCINITAS, CA 92024
Effective as of 01-DEC-20

CARDIAC ELECTROPHYSIOLOGY

HAMZEI, ALI, MD†
Provider ID: N/A

320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WHITWAM, WAYNE, MD†
Provider ID: N/A
320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-AUG-22

CARDIOVASCULAR DISEASE

AVALOS, ROY, MD†
Provider ID: N/A
320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BACKMAN, JOHN, MD†
Provider ID: N/A
320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

BULIBEK, BATYRJAN, MD†
Provider ID: N/A
320 SANTA FE DR STE 204
ENCINITAS, CA 92024
Effective as of 01-JAN-21

CARTER, STEPHANIE, MD†
Provider ID: N/A
700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-21

CARTER, STEPHANIE, MD†
Provider ID: N/A
354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-JUN-21
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**CERTIFIED ACUPUNCTURIST**

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C1. 網絡內提供者清單
專科護理醫師

781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-23

DWYER, ERIN, NP
Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JAN-24

FAIQ, JAMILA, NP
Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-JUL-23

FAIQ, JAMILA, NP
Provider ID: N/A
477 N EL CAMINO REAL
STE D200
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HERR, COLLEEN, NP
Provider ID: N/A
477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HOOPER, BONNIE, NP
Provider ID: N/A
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

HOOPER, BONNIE, NP
Provider ID: N/A
477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

KORMANIK, PATRICIA, NP
Provider ID: N/A
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

LOWE, ASHLEY, NP
Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-21

MAROSOK, MICHELLE, NP
Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

MOONEY, PATRICIA, NP
Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-21

MOONEY, PATRICIA, NP
Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice
Effective as of 01-NOV-23

MOORE, HEATHER, NP
Provider ID: N/A
477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MORENO, KATHERINE, NP
Provider ID: N/A
700 GARDEN VIEW CT STE 204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-DEC-23

MWAURA, WAIRIMU, NP
Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

MWAURA, WAIRIMU, NP
Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

MYERS, JESSE, NP
Provider ID: N/A
477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Teleservice
Effective as of 01-DEC-21

NIZHEBORSKY, OKSANA, NP
Provider ID: N/A
320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PACHOE, MADISON, NP
Provider ID: N/A
477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Teleservice
Effective as of 01-DEC-21

POLIZZI, BRITTANY, NP
Provider ID: N/A
C1. 網絡內提供者清單

網路內提供者清單

477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-JAN-22

POLIZZI, BRITTANY, NP
Provider ID: N/A
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Effective as of 01-SEP-22

POVOLI, LAUREN, NPF
Provider ID: N/A
477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

SRILASAK, MICHELE, NP
Provider ID: N/A
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUN-21

STUBBE, AMANDA, NPF
Provider ID: N/A
477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

SYMANSKI, ELIZABETH, NP
Provider ID: N/A
477 N EL CAMINO REAL
STE A200
ENCINITAS, CA 92024
Effective as of 01-AUG-22

TOMICICH, STEPHANIE, NP
Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-DEC-21

WALLA, MEGAN, NPF
Provider ID: N/A
477 N EL CAMINO REAL
STE A100
ENCINITAS, CA 92024
Effective as of 01-APR-24

WILLEY, MARTI, NP
Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

WILLEY, MARTI, NP
Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-23

WOODRUFF, WHITNEY, NP
Provider ID: N/A
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

WOODRUFF, WHITNEY, NP
Provider ID: N/A
781 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

YEO, ALEXANDRIA, NP
Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-DEC-21

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

CERTIFIED REGISTERED
NURSE ANESTHETIST

ASHMAN, RANDY, CRNA
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-23

ESTABROOK, LARA, CRNA
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
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ESTABROOK, LARA, CRNA
Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-APR-24

FITZPATRICK, APRIL, CRNA
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

FITZPATRICK, APRIL, CRNA
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

KING, APRIL, CRNA
Provider ID: N/A
781 GARDEN VIEW CT STE
網絡內提供者清單

專科護理醫師

KING, APRIL, CRNA
Provider ID: N/A
700 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024 Effective as of 01-MAR-23

KING, APRIL, CRNA
Provider ID: N/A
781 GARDEN VIEW CT STE 100 ENCINITAS, CA 92024 Effective as of 01-JAN-21

LAZARUS, ELIZABETH, CRNA
Provider ID: N/A
781 GARDEN VIEW CT STE 102 ENCINITAS, CA 92024 Effective as of 01-MAR-23

CERTIFIED REGISTERED NURSE MIDWIFE

CORRY, ANDREA, CRNM
Provider ID: N/A
1200 GARDEN VIEW RD ENCINITAS, CA 92024 Effective as of 01-SEP-23

ELY-KONOSKE, RACHEL, CRNM
Provider ID: N/A
1200 GARDEN VIEW RD ENCINITAS, CA 92024 Effective as of 01-DEC-23

CHIROPRACTOR

TRAINER, JASON, DC
Provider ID: N/A
1130 2ND ST ENCINITAS, CA 92024 Effective as of 01-MAR-24

DERMATOLOGY

ANGRA, KUNAL, MD
Provider ID: N/A
477 N EL CAMINO REAL STE D308 ENCINITAS, CA 92024 Teleservice Effective as of 01-JUL-21

ANGRA, KUNAL, MD
Provider ID: N/A
477 N EL CAMINO REAL STE D308 ENCINITAS, CA 92024 Teleservice Effective as of 01-JUL-21

BRAUN, TARA, MD
Provider ID: N/A
477 N EL CAMINO REAL STE D308 ENCINITAS, CA 92024 Teleservice Effective as of 01-MAR-24

BROUHA, BROOK, MD
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477 N EL CAMINO REAL STE D308 ENCINITAS, CA 92024 Effective as of 01-NOV-23

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477 N EL CAMINO REAL STE D308 ENCINITAS, CA 92024 Effective as of 01-NOV-23

GRUSHCHAK, SOLOMIYA, MD
Provider ID: N/A
285 N EL CAMINO REAL STE 117 ENCINITAS, CA 92024 Effective as of 01-JAN-24

GLADSJO, JULIE, MD
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GLADSJO, JULIE, MD
Provider ID: N/A
285 N EL CAMINO REAL STE 117
### C1. 網絡內提供者清單

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**Endocrinology**

**Metabolism**

**Diabetes**

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**Family Practice**

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**Gastroenterology**

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**Metabolism**

**Diabetes**

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**Metabolism**

**Diabetes**

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**Gastroenterology**

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<th>有效日期</th>
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<td>Dilauro, Steven, MD</td>
<td>01-MAR-23</td>
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C1. 網絡內提供者清單
專科護理醫師

Teleservice
Effective as of 01-MAR-23

DILAURO, STEVEN, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-23

DILAURO, STEVEN, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

DILAURO, STEVEN, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

GOLDKLANG, ROBERT, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024
Effective as of 01-MAR-23

GOLDKLANG, ROBERT, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024
Effective as of 01-OCT-23

GOLDKLANG, ROBERT, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

MADANI, BAHAR, MD
Provider ID: N/A
477 N EL CAMINO REAL STE A308
ENCINITAS, CA 92024
Effective as of 01-FEB-22

PATEL, JANIKI, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Effective as of 01-FEB-24

PATEL, JANIKI, MD†
Provider ID: N/A
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

PATEL, JANIKI, MD†
Provider ID: N/A
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LAJOIE, ADRIANNE, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Effective as of 01-OCT-23

LAJOIE, ADRIANNE, MD†
Provider ID: N/A
700 GARDEN VIEW CT STE 102
ENCINITAS, CA 92024
Effective as of 01-JAN-21

LAJOIE, ADRIANNE, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Effective as of 01-MAR-23

LAJOIE, ADRIANNE, MD
Provider ID: N/A
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Effective as of 01-JAN-24
### Provider Information

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<tr>
<td>Mehrotra, Sachi, DDS</td>
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<td>01-Oct-21</td>
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<td><strong>GYNECOLOGIC ONCOLOGY</strong></td>
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<td>Eskander, Ramez, MD</td>
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<td>01-Feb-21</td>
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<td><strong>HEMATOLOGY / ONCOLOGY</strong></td>
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<td>Bessudo, Alberto, MD</td>
<td>326 Santa Fe Dr Ste</td>
<td>01-APR-21</td>
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<td><strong>INTERNAL MEDICINE</strong></td>
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<td>Bautista, Jennifer, MD</td>
<td>326 Santa Fe Dr Ste</td>
<td>01-Dec-20</td>
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169
C1. 網絡內提供者清單

專科護理醫師

220 ENCINITAS, CA 92024*
Teleservice
Effective as of 01-OCT-22

DESGRANGES, PATRICK, MD†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Teleservice
Effective as of 01-NOV-21

EISMAN, SCOTT, MD†
Provider ID: N/A
326 SANTA FE DR STE 100 ENCINITAS, CA 92024
Effective as of 01-FEB-22

ELHOFY, ASHRAF, MD†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Effective as of 01-JAN-21

ELLIS, ADAM, MD†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Effective as of 01-JAN-21

KHAYYAT, OMAR, MD†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Effective as of 01-AUG-21

LIU, STEVEN, MD†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*

Effective as of 01-JAN-21

LIU, ANDREW, MD
Provider ID: N/A
320 SANTA FE DR STE 212 ENCINITAS, CA 92024
Effective as of 01-SEP-23

MCMURRAY, SARAH, DO†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Effective as of 01-JAN-21

Moolani, Ujjala, MD
Provider ID: N/A
320 SANTA FE DR STE 212 ENCINITAS, CA 92024
Effective as of 01-MAY-23

NARDI, MELISSA, DO†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Effective as of 01-JAN-21

NELKIN, CORY, DO†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Effective as of 01-JAN-21

NGUYEN, ANDY, DO†
Provider ID: N/A
320 SANTA FE DR STE 100 ENCINITAS, CA 92024
Effective as of 01-APR-21

NGUYEN, ALEXIE, MD†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*

Effective as of 01-JAN-21

PHAM, STEVEN, MD†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Teleservice
Effective as of 01-NOV-21

RUMMANI, BENNY, DO†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Effective as of 01-JUL-21

STEADMAN, MICHAEL, MD†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Effective as of 01-JAN-21

TRAN, SHERI, MD†
Provider ID: N/A
320 SANTA FE DR STE 100 ENCINITAS, CA 92024
Effective as of 01-APR-21

TRAN, AMY, MD†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
Effective as of 01-JAN-21

TRING, ELEANOR, DO†
Provider ID: N/A
662 ENCINITAS BLVD STE 220 ENCINITAS, CA 92024*
C1. 網絡內提供者清單

**专科護理醫師**

Effective as of 01-JUL-21

**INTERNAL MEDICINE**

**CRITICAL CARE MEDICINE**

FUSSELL, KEVIN, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

PINO, ALEJANDRO, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

SHIN, STEPHANIE, MD†
Provider ID: N/A
320 SANTA FE DR STE 107-C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

TRAN, SHERI, MD†
Provider ID: N/A
320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

ZHANG, MICHELLE, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAY-22

**LICENSED CLINICAL SOCIAL WORKER**

REBELO, MARCIA, LCSW
Provider ID: N/A
187 CALLE MAGDALENA STE 212
ENCINITAS, CA 92024
Effective as of 01-OCT-23

**INTERVENTIONAL CARDIOLOGY**

BHATIA, PRERANA, MD
Provider ID: N/A
477 N EL CAMINO REAL
ENCINITAS, CA 92024

**MEDICAL ONCOLOGY**

FLORES, EDNA, MD†
Provider ID: N/A
326 SANTA FE DR STE 105
ENCINITAS, CA 92024
Effective as of 01-JAN-21

FRAKES, LAURIE, MD†
Provider ID: N/A
320 SANTA FE DR STE 105
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24

**NEPHROLOGY**

AL-DAHHAN, ZAID, MD
Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-MAY-23

LAKHERA, YOGITA, MD†
Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-17

LAKHERA, YOGITA, MD†
Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-24
C1. 網絡內提供者清單

專科護理醫師

LAKHERA, YOGITA, MD† Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-22

LAKHERA, YOGITA, MD† Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JAN-21

STEER, DYLAN, MD† Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-JAN-21

NEUROLOGY

BAKER, DAVID, DO Provider ID: N/A
354 SANTA FE DR
ENCINITAS, CA 92024
Effective as of 01-JAN-24

SCHORR, EMILY, MD Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-MAR-24

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD† Provider ID: N/A
1200 GARDEN VIEW RD STE 200
ENCINITAS, CA 92024
Effective as of 01-JUL-21

DELCORE, LAURA, MD† Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-AUG-22

DRIEBE, AMY, MD† Provider ID: N/A
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
Effective as of 01-SEP-22

DRIEBE, AMY, MD† Provider ID: N/A
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Effective as of 01-SEP-22

HILL, KAITLYN, MD† Provider ID: N/A
477 N EL CAMINO REAL STE C208
ENCINITAS, CA 92024
Teleservice
Effective as of 01-SEP-21

HILL, KAITLYN, MD† Provider ID: N/A
477 N EL CAMINO REAL STE C208
ENCINITAS, CA 92024
Effective as of 01-APR-23

MACKAY, GILLIAN, MD Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SPRING ROBINSON, CHANDRA, DO Provider ID: N/A
477 N EL CAMINO REAL STE C208
ENCINITAS, CA 92024
Effective as of 01-JAN-23

FISH, STEVEN, MD Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

FISH, STEVEN, MD Provider ID: N/A
320 SANTA FE DR STE 104
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Effective as of 01-APR-23

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320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

FISH, STEVEN, MD Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-23

HUDSON, HENRY, MD† Provider ID: N/A
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Effective as of 01-APR-22

JOHNSTON, ERIC, MD Provider ID: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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<td>MCGRAW, JOSEPH, MD†</td>
<td>Provider ID: N/A</td>
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<td>SAMUEL, MICHAEL, MD†</td>
<td>Provider ID: N/A</td>
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<td>01-FEB-21</td>
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<td>VIECHNICKI, TARA, MD</td>
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<td>ZABANEH, ALEXANDER, MD†</td>
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<td>ZHAO, TAILUN, MD</td>
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**Optometrist**

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<td>ELI, BRADLEY, DMD</td>
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**Otolaryngology**

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<tr>
<td>REUTHER, MARSHA, MD†</td>
<td>Provider ID: N/A</td>
<td>477 N EL CAMINO REAL STE A308</td>
<td>ENCINITAS</td>
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**Pediatrics**

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<td>MEHRAS, KAUSHAL, MD†</td>
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**Physicians Assistant**

<table>
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<td>DOUGHERTY, CLARA, PA†</td>
<td>Provider ID: N/A</td>
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<td>ENCINITAS</td>
<td>92024</td>
<td>01-JAN-21</td>
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</table>
C1. 網絡內提供者清單

专科護理醫師

- **DOUGHERTY, CLARA, PA²**
  Provider ID: N/A
  320 SANTA FE DR STE 108
  ENCINITAS, CA 92024
  Effective as of 01-FEB-24

- **GILLAN, JAMES, PA²**
  Provider ID: N/A
  320 SANTA FE DR STE 107-C
  ENCINITAS, CA 92024
  Effective as of 01-JAN-21

- **HIGGINS, JOSHUA, PA²**
  Provider ID: N/A
  1505 ENCINITAS BLVD
  ENCINITAS, CA 92024
  Effective as of 01-AUG-23

- **MORENO, SYDNIE, PA**
  Provider ID: N/A
  477 N EL CAMINO REAL
  STE A200
  ENCINITAS, CA 92024
  Effective as of 01-APR-24

- **PELIO, DARREN, PA²**
  Provider ID: N/A
  1200 GARDEN VIEW RD
  ENCINITAS, CA 92024
  Effective as of 01-SEP-22

- **VANETSKY, GARY, PA²**
  Provider ID: N/A
  477 N EL CAMINO REAL
  STE D308
  ENCINITAS, CA 92024
  Effective as of 01-JAN-21

- **PODIATRIST**

  - **BERENTER, JAY, DPM²**
    Provider ID: N/A
    501 N EL CAMINO REAL
    STE 201
    ENCINITAS, CA 92024
    Effective as of 01-DEC-21

  - **BERGER, COLBY, DPM**
    Provider ID: N/A
    501 N EL CAMINO REAL
    STE 201
    ENCINITAS, CA 92024
    Effective as of 01-DEC-23

  - **DUSTIN, ADAM, DPM²**
    Provider ID: N/A
    326 ENCINITAS BLVD STE 100
    ENCINITAS, CA 92024
    Effective as of 01-FEB-21

- **PSYCHOLOGIST**

  - **GOMEZ, JUANITA, PhD²**
    Provider ID: N/A
    1505 ENCINITAS BLVD
    ENCINITAS, CA 92024
    Effective as of 01-AUG-22

  - **KREPS, CHRISTOPHER, DPM**
    Provider ID: N/A
    501 N EL CAMINO REAL
    STE 201
    ENCINITAS, CA 92024
    Effective as of 01-JUN-23

  - **LIEBERMAN, RONALD, DPM**
    Provider ID: N/A
    501 N EL CAMINO REAL
    STE 201
    ENCINITAS, CA 92024
    Effective as of 01-DEC-23

  - **RUETENIK, BRAD, DPM**
    Provider ID: N/A
    1011 DEVONSHIRE DR STE F
    ENCINITAS, CA 92024
    Effective as of 01-AUG-15

  - **VANETSKY, GARY, PA²**
    Provider ID: N/A
    501 N EL CAMINO REAL
    STE 201
    ENCINITAS, CA 92024
    Effective as of 01-JUN-23

- **PULMONARY DISEASES**

  - **GOMEZ, JUANITA, PhD²**
    Provider ID: N/A
    501 N EL CAMINO REAL
    STE 201
    ENCINITAS, CA 92024
    Effective as of 01-AUG-22
C1. 網絡內提供者清單

EISMAN, SCOTT, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

FUSSELL, KEVIN, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GADRE, ABHISHEK, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GADRE, ABHISHEK, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

HSING, ANDREW, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JUL-21

HSING, ANDREW, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JAN-24

LIANG, NI-CHENG, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-NOV-20

LIANG, NI-CHENG, MD†
Provider ID: N/A
320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-MAY-23

MAGANA, MARISA, MD†
Provider ID: N/A
326 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-APR-21

MAGANA, MARISA, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

MAKANI, SAMIR, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

MAKANI, SAMIR, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

MAKANI, SAMIR, MD†
Provider ID: N/A
320 SANTA FE DR STE 107C
ENCINITAS, CA 92024
Effective as of 01-JAN-21

PIÑO, ALEJANDRO, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

SARNOFF, ROBERT, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-SEP-22

SARNOFF, ROBERT, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-JAN-21

SARNOFF, ROBERT, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-21

SHIN, STEPHANIE, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

TRAN, SHERI, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

ZHANG, MICHELLE, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-APR-23

ZHANG, MICHELLE, MD†
Provider ID: N/A
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Effective as of 01-DEC-20

RADIATION ONCOLOGY

BEAR, JONATHAN, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

HATTANGADI GLUTH, JONA, MD
Provider ID: N/A
1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

HORN, ADAM, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

MACEWAN, IAIN, MD†
Provider ID: N/A
1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MANSY, GINA, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MAYADEV, JYOTI, MD†
Provider ID: N/A
1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MELL, LOREN, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

MURPHY, JAMES, MD†
Provider ID: N/A
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Effective as of 01-JUN-23

RAHN, DOUGLAS, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

ROSE, BRENT, MD†
Provider ID: N/A
1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SANDHU, AJAY, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

SEIBERT, TYLER, MD†
Provider ID: N/A
1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

SHARABI, ANDREW, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

SIMPSON, DANIEL, MD
Provider ID: N/A
1200 GARDEN VIEW RD
STE 210
ENCINITAS, CA 92024
Effective as of 01-DEC-23

STRAKA, CHRISTOPHER, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

TYE, KAREN, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

WHITE, EVAN, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JUN-23

YASHAR, CATHERYN, MD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-DEC-23

REGISTERED DIETITIAN / NUTRITIONIST

SALCEDO, ALEXANDRA, RD
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

DOULL, MATTHEW, PT
Provider ID: N/A
351 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-23

TAMAYO, SYDNIE, PT
Provider ID: N/A
C1. 網絡內提供者清單
専科護理醫師

SLEEP MEDICINE
MENN, STUART, MD
Provider ID: N/A
351 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

SURGERY COLON
SURGERY
PARRY, LISA, MD†
Provider ID: N/A
4403 MANCHESTER AVE
STE 101
ENCINITAS, CA 92024
Effective as of 01-MAR-23

SCHULTZEL, MATTHEW, DO†
Provider ID: N/A
477 N EL CAMINO REAL
STE 101
ENCINITAS, CA 92024
Effective as of 01-OCT-23

SURGERY GENERAL
ARMANI, AVA, MD†
Provider ID: N/A
351 SANTA FE DR STE 100
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

BURGESS, DANIEL, DO†
Provider ID: N/A
477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

BURGESS, DANIEL, DO†
Provider ID: N/A
477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUN-21

BURGESS, DANIEL, DO†
Provider ID: N/A
477 N EL CAMINO REAL
STE A308
ENCINITAS, CA 92024
Teleservice
Effective as of 01-OCT-23

JACOBSEN, GARTH, MD†
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-JAN-21

RAYAN, SUNIL, MD†
Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-JAN-15

CHANG, JUSTIN, MD
Provider ID: N/A
332 SANTA FE DR STE 110
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-20

RAYAN, SUNIL, MD†
Provider ID: N/A
320 SANTA FE DR STE 212
ENCINITAS, CA 92024
Effective as of 01-OCT-23

BURGESS, DANIEL, DO†
Provider ID: N/A
477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-20

AFRA, ROBERT, MD†
Provider ID: N/A
317 N EL CAMINO REAL STE
ENCINITAS, CA 92024
Effective as of 01-JUN-21

BREMNER, LUKE, MD
Provider ID: N/A
332 SANTA FE DR STE 110
ENCINITAS, CA 92024
Effective as of 01-OCT-23

BREMNER, LUKE, MD
Provider ID: N/A
332 SANTA FE DR STE 110
ENCINITAS, CA 92024
Effective as of 01-MAR-23

CHANG, JUSTIN, MD
Provider ID: N/A
332 SANTA FE DR STE 110
ENCINITAS, CA 92024
Teleservice
Effective as of 01-JUL-20

CHANG, JUSTIN, MD
Provider ID: N/A
332 SANTA FE DR STE 110
ENCINITAS, CA 92024
Teleservice
Effective as of 01-MAR-23

GROTTING, JOHN, MD
Provider ID: N/A
477 N EL CAMINO REAL STE B301
ENCINITAS, CA 92024
Effective as of 01-MAY-22

MEINEKE, RYAN, MD
Provider ID: N/A
332 SANTA FE DR STE 110
ENCINITAS, CA 92024
Effective as of 01-JAN-23

HAJNIK, CHRISTOPHER, MD
Provider ID: N/A
332 SANTA FE DR STE 110
ENCINITAS, CA 92024
Effective as of 01-DEC-19

MEINEKE, RYAN, MD†
Provider ID: N/A
332 SANTA FE DR STE 110
ENCINITAS, CA 92024
Effective as of 01-MAR-23

RAISZADEH, RAMIN, MD†
Provider ID: N/A
332 SANTA FE DR STE 110
ENCINITAS, CA 92024
Effective as of 01-JAN-23

SCHULTZEL, MARK, MD†
Provider ID: N/A
519 ENCINITAS BLVD STE 106
ENCINITAS, CA 92024
Effective as of 01-OCT-22

SURGERY PLASTIC

CHAO, JAMES, MD†
Provider ID: N/A
499 N EL CAMINO REAL STE C200
ENCINITAS, CA 92024
Effective as of 01-JUL-15

GOSMAN, AMANDA, MD†
Provider ID: N/A
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Effective as of 01-SEP-22

GUPTA, ANSHU, MD
Provider ID: N/A
351 SANTA FE DR STE 250
ENCINITAS, CA 92024
Effective as of 01-MAY-23

GUPTA, ABHAY, MD
Provider ID: N/A
700 GARDEN VIEW CT STE 208
ENCINITAS, CA 92024
Effective as of 01-MAY-23

SURGICAL ONCOLOGY

CHEN, STEVEN, MD†
Provider ID: N/A
499 N EL CAMINO REAL STE C200
ENCINITAS, CA 92024
Effective as of 01-JUL-15

UROLOGY

COHEN, EDWARD, MD†
Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-APR-16

COHEN, EDWARD, MD†
Provider ID: N/A
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Effective as of 01-JUL-15

COHEN, EDWARD, MD†
Provider ID: N/A
320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-SEP-21

COHEN, EDWARD, MD†
Provider ID: N/A
320 SANTA FE DR STE 305
ENCINITAS, CA 92024
Effective as of 01-SEP-22
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<td>NEUSTEIN, PAUL, MD</td>
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<td>ROBERTS, JAMES, MD</td>
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<td>KHATIBI, NIKAN, DO</td>
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<td>160 N DATE ST</td>
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<td>01-MAY-21</td>
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<td>KHATIBI, NIKAN, DO</td>
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<td>160 N DATE ST</td>
<td>ESCONDIDO, CA 92025</td>
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<td>COHEN, ZACHARY, MD</td>
<td>N/A</td>
<td>940 E VALLEY PKWY STE K</td>
<td>ESCONDIDO, CA 92025</td>
<td>01-JAN-23</td>
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<tr>
<td>DAIRO, BRANDON, MD</td>
<td>N/A</td>
<td>1955 CITRACADO PKWY STE 203</td>
<td>ESCONDIDO, CA 92029</td>
<td>01-JAN-21</td>
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**ANESTHESIOLOGY**

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<td>FARUQUE, TANIA, MD</td>
<td>N/A</td>
<td>255 N ELM ST STE 101</td>
<td>ESCONDIDO, CA 92025</td>
<td>01-JAN-21</td>
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**ANESTHESIOLOGY PAIN MANAGEMENT**

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<tr>
<td>COHEN, ZACHARY, MD</td>
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<td>01-JAN-23</td>
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**ANESTHESIOLOGY**

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<td>FARUQUE, TANIA, MD</td>
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<td>255 N ELM ST STE 101</td>
<td>ESCONDIDO, CA 92025</td>
<td>01-JAN-21</td>
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</table>
C1. 網絡內提供者清單

專業護理醫師

Effective as of 01-NOV-22
Khatibi, Nikan, DO†
Provider ID: N/A
160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

Khatibi, Nikan, DO†
Provider ID: N/A
160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

Khatibi, Nikan, DO†
Provider ID: N/A
160 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

Prasad, Rupa, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-23

Robinson, Cole, MD
Provider ID: N/A
160 N DATE ST
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUN-23

Audiologist

Herrera, Charity, AuD†
Provider ID: N/A
330 W FELICITA AVE STE A4
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

Lerner, Jonathan, MD
Provider ID: N/A
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

Moussavian, Mehran, DO†
Provider ID: N/A
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

Narayan, Meena, MD†
Provider ID: N/A
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21

Parikh, Milind, DO†
Provider ID: N/A
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Effective as of 01-MAY-21
# C1. 網絡內提供者清單

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<th>Provider</th>
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<tr>
<td>SARSAM, LUAY, MD</td>
<td>Provider ID: N/A</td>
<td>488 E VALLEY PKWY STE 107</td>
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<td>SARSAM, LUAY, MD</td>
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<tr>
<td>SERRY, ROD, MD</td>
<td>Provider ID: N/A</td>
<td>2130 CITRACADO PKWY STE 200</td>
<td>ESCONDIDO, CA 92029</td>
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<tr>
<td>SHAH, KULIN, MD</td>
<td>Provider ID: N/A</td>
<td>488 E VALLEY PKWY STE 107</td>
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<tr>
<td>SHAH, ABHISHEK, MD</td>
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<td>SUDHAKAR, DEEPTHI, MD</td>
<td>Provider ID: N/A</td>
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<td>CHEN, SISI, LAC</td>
<td>Provider ID: N/A</td>
<td>240 W MISSION AVE STE C</td>
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<tr>
<td>KIM, MIN JOO, LAC</td>
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<td>SUDHAKAR, DEEPTHI, MD</td>
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<tr>
<td>CARNEY, AMY, NP</td>
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<tr>
<td>GARVIN, JOSEPH, NP</td>
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<td>ESCONDIDO, CA 92029</td>
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<td>SPAULDING, ENJOLI, NP</td>
<td>Provider ID: N/A</td>
<td>631 E GRAND AVE</td>
<td>ESCONDIDO, CA 92025</td>
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<tr>
<td>RICE, ELIZABETH, NP</td>
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<td>TRAN, DAPHNE, NP</td>
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<td>ESCONDIDO, CA 92029</td>
<td>Effective as of 01-FEB-23</td>
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C1. 網絡內提供者清單

專業護理醫師

CERTIFIED REGISTERED NURSE ANESTHETIST

BARBA, ARNEL, CRNA
Provider ID: N/A
488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BROWN, SHENISE, CRNA
Provider ID: N/A
488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

FIEDLER, DEREK, CRNA
Provider ID: N/A
488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HASE, KATHLEEN, CRNA
Provider ID: N/A
488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

ORTEGA, JOSEPH, CRNA
Provider ID: N/A
488 E VALLEY PKWY STE 110
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

SEILNACHT-BERNARD, KAREN, CRNA
Provider ID: N/A
488 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CERTIFIED REGISTERED NURSE MIDWIFE

ALLEN, ANNE, CRNM
Provider ID: N/A
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

HAMILTON, HEATHER, CRNM
Provider ID: N/A
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

ONEILL, THERESE, CRNM
Provider ID: N/A
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

LOWE, JENIFER, CRNM
Provider ID: N/A
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

DERMATOLOGY

ARMSTRONG, PATRICK, MD
Provider ID: N/A
2125 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

STEIN, ALEXANDER, MD
Provider ID: N/A
1101 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

VENKAT, ARUN, MD
Provider ID: N/A
488 E VALLEY PKWY
ESCONDIDO, CA 92025

KEYS, ANNA, DC
Provider ID: N/A
240 W MISSION AVE STE C
ESCONDIDO, CA 92025
Effective as of 01-JUN-21

ZECHA, RONALD, DC
Provider ID: N/A
488 E VALLEY PKWY STE 411
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

ZECHA, RONALD, DC
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

ZECHA, RONALD, DC
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-22

CHIROPRACTOR

BARTZ, PAUL, DC
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

FONSECA, ROSANNA, DC
Provider ID: N/A
2065 S ESCONDIDO BLVD STE 105
ESCONDIDO, CA 92025
Effective as of 01-MAY-21
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<td><strong>CHELIMILLA, HARITHA, MD</strong></td>
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<td><strong>SHAFT, ALEXANDER, MD</strong></td>
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<td>488 E VALLEY PKWY STE 313 ESCONDIDO, CA 92025</td>
<td><strong>HASSANEIN, TAREK, MD</strong></td>
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<td>728 E GRAND AVE ESCONDIDO, CA 92025</td>
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<td><strong>FAMILY PRACTICE</strong></td>
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<td><strong>HEARING AID DEALER / SUPPLIER</strong></td>
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<td>935 E PENNSYLVANIA AVE ESCONDIDO, CA 92025</td>
<td><strong>LY, SOPHEAP, MD</strong></td>
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<td>Effective as of 01-SEP-22</td>
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<td>728 E VALLEY PKWY</td>
<td>Provider ID: N/A</td>
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ESCONDIDO, CA 92025
Effective as of 01-NOV-23

OLIVER, DEANNA, MD†
Provider ID: N/A
488 E VALLEY PKWY STE 313
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

PEARCE, DANIEL, DO
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED, MD
Provider ID: N/A
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

GILBERT, CHRISTOPHER, MD
Provider ID: N/A
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029
Effective as of 01-MAR-23

GORWIT, JEFFREY, MD
Provider ID: N/A
2130 CITRACADO PKWY STE 220
ESCONDIDO, CA 92029*
Effective as of 01-MAR-23

RUBIO GARCIA, MANOLO, MD†
Provider ID: N/A
488 E VALLEY PKWY STE 107
ESCONDIDO, CA 92025
Effective as of 01-MAY-22

GUZZO, RICHARD, LCSW
Provider ID: N/A
1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

HARRIS, LAURA, LCSW
Provider ID: N/A
1002 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

MAGOS, DANIEL, LCSW
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-NOV-22

ROBLED, DAMIAN, LCSW
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

ROBLED, DAMIAN, LCSW
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

THOMAS, PAULA, LCSW
Provider ID: N/A
C1. 網絡內提供者清單

專科護理醫師

THOMAS, PAULA, LCSW
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-23

MARRIAGE FAMILY THERAPIST

CABRERA, JOANNE, MFT
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

HOLLEMAN, KEVIN, DO
Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

PRATHER, ALLYSON, MFT
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

TIZNADO, MONICA, MFT
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

Nephrology

AL-DAHHAM, ZAID, MD
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-AUG-23

AL-DAHHAM, ZAID, MD
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-NOV-23

CHOUDRY, QASIM, MD
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

CHOUDRY, QASIM, MD
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

CHOUDRY, QASIM, MD
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

GREENSTEIN, JOSHUA, MD
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

GREENSTEIN, JOSHUA, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-OCT-23

GREENSTEIN, JOSHUA, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

GREENSTEIN, JOSHUA, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

HEBREO, JOSEPH, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-23

HEBREO, JOSEPH, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

HEBREO, JOSEPH, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22
C1. 網絡內提供者清單

網絡內提供者清單

HEBREO, JOSEPH, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

HEBREO, JOSEPH, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-MAR-17

KHAWAR, OSMAN, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

KHAWAR, OSMAN, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

SHAPIRO, MARK, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

SHAPIRO, MARK, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

KHAWAR, OSMAN, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

KHAWAR, OSMAN, MD†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-21

NEYAZ, MOHAMMED, DO†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

NEYAZ, MOHAMMED, DO†
Provider ID: N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-22

NEUROLOGY

DELANEY, MICHAEL, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

DELANEY, MICHAEL, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

DELANEY, MICHAEL, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

OH, IRENE, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

OH, IRENE, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

OH, IRENE, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FRISHBERG, BENJAMIN, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-22

FRISHBERG, BENJAMIN, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

FRISHBERG, BENJAMIN, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-MAR-24

FARNSWORTH, WILLIAM, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-NOV-21

FARNSWORTH, WILLIAM, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-FEB-22

1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-MAR-24

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C1. 網絡內提供者清單
專科護理醫師

ESCONDIDO, CA 92029
Effective as of 01-JAN-21

PADUGA, REMIA, MD†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

QUESNELL, TARA, DO†
Provider ID: N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-NOV-23

OBSTETRICS / GYNECOLOGY

BABKINA, NATALIA, MD
Provider ID: N/A
488 E VALLEY PKWY STE 308
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

*BABKINA, NATALIA, MD
Provider ID: N/A
488 E VALLEY PKWY STE 310
ESCONDIDO, CA 92025
Effective as of 01-MAY-24

CIZMAR, BRANISLAV, MD
Provider ID: N/A
2130 CITRACADO PKWY
STE 220
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

HINSHAW, PAUL, DO†
Provider ID: N/A
1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

HINSHAW, PAUL, DO†
Provider ID: N/A
488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025
Effective as of 01-SEP-22
### C1. 網絡內提供者清單

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<th>專科護理醫師</th>
<th>Provider ID</th>
<th>有效日期</th>
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<td><strong>HUSKEY, DANA, MD</strong></td>
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ESCONDIDO, CA 92025 | | |
| **OPHTHALMOLOGY** | | |
| **AVALLONE, THOMAS, MD** | N/A | 01-APR-23 |
| 700 W EL NORTE PKWY  
ESCONDIDO, CA 92026 | | |
| **BINDER, NICHOLAS, MD** | N/A | 01-JUL-21 |
| 700 W EL NORTE PKWY STE 200  
ESCONDIDO, CA 92026 | | |
| **BINDER, NICHOLAS, MD** | N/A | 01-MAR-23 |
| 830 W VALLEY PKWY STE 300  
ESCONDIDO, CA 92025 | | |
| **MCGRAW, JOSEPH, MD** | N/A | 01-DEC-23 |
| 830 W VALLEY PKWY STE 300  
ESCONDIDO, CA 92025 | | |
| **MORRISON-REYES, JOSHUA, MD** | N/A | 01-SEP-22 |
| 830 W VALLEY PKWY STE 300  
ESCONDIDO, CA 92025 | | |

注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

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C1. 網絡內提供者清單

專科護理醫師

MORTON, ASA, MD†
Provider ID: N/A
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-AUG-23

PATEL, GITANE, MD†
Provider ID: N/A
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PATEL, SARJAN, MD†
Provider ID: N/A
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†
Provider ID: N/A
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

PRABHU, SUJATA, MD†
Provider ID: N/A
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

PRABHU, SUJATA, MD†
Provider ID: N/A
700 W EL NORTE PKWY STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-23

PRABHU, SUJATA, MD†
Provider ID: N/A
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

OPTOMETRIST

AOTO, KIM, OD†
Provider ID: N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-DEC-21

ROESKE, RICHMOND, MD
Provider ID: N/A
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-MAR-24

SHEILS, CATHERINE, MD
Provider ID: N/A
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

SHEILS, CATHERINE, MD
Provider ID: N/A
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Effective as of 01-JAN-24

ZHAO, TAILUN, MD
Provider ID: N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-NOV-23

ZHAO, TAILUN, MD
Provider ID: N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Effective as of 01-JUL-23

AOTO, KIM, OD†
Provider ID: N/A
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD†
Provider ID: N/A
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

AOTO, KIM, OD†
Provider ID: N/A
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

DYER, SHARON, OD†
Provider ID: N/A
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

JULAZADEH, SARA, OD
Provider ID: N/A
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
C1. 網絡內提供者清單

有效日期：01-SEP-23

KHALIL, VADY, OD
提供者ID：N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
有效日期：01-NOV-22

KHALIL, VADY, OD
提供者ID：N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
有效日期：01-DEC-21

KHALIL, VADY, OD
提供者ID：N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
有效日期：01-DEC-23

KHIEU, TINA, OD
提供者ID：N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
有效日期：01-NOV-22

KHIEU, TINA, OD
提供者ID：N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
有效日期：01-DEC-21

KHIEU, TINA, OD
提供者ID：N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
有效日期：01-DEC-23

SCOTT, JEFFREY, OD
提供者ID：N/A
830 W VALLEY PKWY STE 300
ESCONDIDO, CA 92025
有效日期：01-JAN-22

TAUNTON, PHILIP, OD
提供者ID：N/A
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
有效日期：01-SEP-21

TAUNTON, PHILIP, OD
提供者ID：N/A
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
有效日期：01-SEP-23

TONNU, ANH, OD
提供者ID：N/A
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
有效日期：01-DEC-21

PHYS MED/REHAB PAIN MEDICINE

RICHARDSON, HENRY, MD
提供者ID：N/A
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
有效日期：01-MAR-23

PHYSICAL MEDICINE/REHABILITATION

TAHAEI, SEYED, MD
提供者ID：N/A
215 S HICKORY ST STE 116
ESCONDIDO, CA 92025
有效日期：01-OCT-22

PHYSICIANS ASSISTANT

BALDWIN, DONNA, PA
提供者ID：N/A
1035 E GRAND AVE STE 101
ESCONDIDO, CA 92025
有效日期：01-JAN-21

BEITTER, KEERSTIN, PA
提供者ID：N/A
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
有效日期：01-MAR-22

CHATFIELD, ALEXANDRA, PA
提供者ID：N/A
1955 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92026
有效日期：01-SEP-23

COLESON, PAMELA, PA
提供者ID：N/A
460 N ELM ST
ESCONDIDO, CA 92025
有效日期：01-AUG-20

DANESHVAR, ABRAHAM, PA
提供者ID：N/A
631 E GRAND AVE
ESCONDIDO, CA 92025
有效日期：01-AUG-24

GANGJI, SHAZMIN, PA
提供者ID：N/A
460 N ELM ST
ESCONDIDO, CA 92025
有效日期：01-OCT-24

HUANG, STEPHANIE, PA
提供者ID：N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
有效日期：01-JAN-24

MEGALI, NICOLE, PA
提供者ID：N/A
1955 CITRACADO PKWY
STE 102
ESCONDIDO, CA 92029
有效日期：01-JAN-24

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad
C1. 網絡內提供者清單
专科護理醫師

Effective as of 01-APR-24

MEHTA, NOOPUR, PA
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

MONTES, VIVIAN, PA
Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-APR-24

NG, EUNICE, PA
Provider ID: N/A
488 E VALLEY PKWY STE 411
ESCONDIDO, CA 92025
Effective as of 01-APR-24

NIAKAMAL, EVAN, PA†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WICKWARE, TRACY, PA
Provider ID: N/A
488 E VALLEY PKWY STE 411
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

WICKWARE, TRACY, PA†
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WICKWARE, TRACY, PA†
Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WICKWARE, TRACY, PA†
Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WILE, KIMBERLY, PA
Provider ID: N/A
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Effective as of 01-APR-24

WRIGHT, DEREK, PA
Provider ID: N/A
1955 CITRACADO PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

WRIGHT, DEREK, PA
Provider ID: N/A
1955 CITRACADO PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

PODIATRIST

BANKS, JAMINELLI, DPM†
Provider ID: N/A
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

CHU, ANDREW, DPM†
Provider ID: N/A
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FARMER, STEVEN, DPM†
Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FARMER, STEVEN, DPM†
Provider ID: N/A
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Effective as of 01-JUL-21

HAN, KYOUNG, DPM
Provider ID: N/A
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Effective as of 01-JAN-22

LARKINS, PHILIP, DPM
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

MEYER, JOAN, DPM
Provider ID: N/A
1147 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-APR-24

MORRIS, JASON, DPM
Provider ID: N/A
736 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-23

MORRIS, JASON, DPM

191
C1. 網絡內提供者清單

<table>
<thead>
<tr>
<th>專科護理醫師</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provider ID: N/A</td>
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<tr>
<td>736 E GRAND AVE ESCONDIDO, CA 92025</td>
</tr>
<tr>
<td>Effective as of 01-MAY-22</td>
</tr>
</tbody>
</table>

**SMITH, COLLIN, DPM**

| Provider ID: N/A | Provider ID: N/A |
| 215 S HICKORY ST STE 118 ESCONDIDO, CA 92025 | 2185 CITRACADO PKWY ESCONDIDO, CA 92029 |
| Effective as of 01-SEP-22 | Effective as of 01-JUL-21 |

**SMITH, COLLIN, DPM**

| Provider ID: N/A | Provider ID: N/A |
| 215 S HICKORY ST STE 118 ESCONDIDO, CA 92025 | 2185 CITRACADO PKWY ESCONDIDO, CA 92029 |
| Effective as of 01-DEC-21 | Effective as of 01-JUL-21 |

**TOUMA, ELIE, DPM**

| Provider ID: N/A | Provider ID: N/A |
| 460 N ELM ST ESCONDIDO, CA 92025 | 425 N DATE ST ESCONDIDO, CA 92025 |
| Effective as of 01-FEB-21 | Effective as of 01-FEB-23 |

**TOUMA, ELIE, DPM**

| Provider ID: N/A | Provider ID: N/A |
| 1045 E PENNSYLVANIA AVE ESCONDIDO, CA 92025 | 425 N DATE ST ESCONDIDO, CA 92025 |
| Effective as of 01-APR-23 | Effective as of 01-AUG-20 |

**PSYCHIATRY**

**CASTILLO, TIFFANY, MD**

| Provider ID: N/A | Provider ID: N/A |
| 425 N DATE ST ESCONDIDO, CA 92025 | 460 N ELM ST ESCONDIDO, CA 92025 |
| Effective as of 01-NOV-22 | Effective as of 01-AUG-20 |

**CASTILLO, TIFFANY, MD**

| Provider ID: N/A | Provider ID: N/A |
| 425 N DATE ST ESCONDIDO, CA 92025 | 460 N ELM ST ESCONDIDO, CA 92025 |
| Effective as of 01-NOV-22 | Effective as of 01-AUG-20 |
C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-JAN-24

EDE, KEKOAA, MD
Provider ID: N/A
460 N ELM ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

EDE, KEKOAA, MD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

FANOUS, ASHRAF, MD
Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD
Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAY-23

FU, KATHERINE, MD
Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

FU, KATHERINE, MD
Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

HOLLEMAN, KEVIN, DO
Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-APR-23

KOH, STEVE, MD†
Provider ID: N/A
704 E GRAND AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

KOH, STEVE, MD†
Provider ID: N/A
255 N ASH ST STE 101
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-22

PARASHAR, ANUSHREE, MD
Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD
Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD
Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

PARASHAR, ANUSHREE, MD²
Provider ID: N/A
221 W CREST ST STE 205
ESCONDIDO, CA 92025
Effective as of 01-MAR-23

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
C1. 網絡內提供者清單

專科護理醫師

RODARTE, GABRIEL, MD†
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

PSYCHOLOGIST

CALOCA, LAURA, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GUARDADO-SOTO, RAQUEL, PhD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD
Provider ID: N/A
426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

MEJIAS, JUAN, PhD
Provider ID: N/A
426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD
Provider ID: N/A
426 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

GREENE, ERIC, PSYD
Provider ID: N/A
425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24
C1. 網絡內提供者清單

專科護理醫師

MEJIAS, JUAN, PhD
Provider ID: N/A
🎉 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

SUOZZO, JOSEPH, PhD†
Provider ID: N/A
🎉 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

SUOZZO, JOSEPH, PhD†
Provider ID: N/A
🎉 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA, PhD
Provider ID: N/A
🎉 488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA, PhD
Provider ID: N/A
🎉 488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA, PhD
Provider ID: N/A
🎉 488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

WOODWORTH, JENNIFER, PSYD
Provider ID: N/A
🎉 425 N DATE ST
ESCONDIDO, CA 92025
Effective as of 01-JAN-24

POPPER, STEVEN, MD²
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FULLER, DONALD, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

FULLER, DONALD, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

COLEMAN, LORI, MD†
Provider ID: N/A
🎉 2125 CITRACADO PKWY STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FULLER, DONALD, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

COLEMAN, LORI, MD†
Provider ID: N/A
🎉 2125 CITRACADO PKWY STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

FULLER, DONALD, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

FULLER, DONALD, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

FULLER, DONALD, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

QUAN, MICHELE, MD†
Provider ID: N/A
🎉 2125 CITRACADO PKWY STE 230
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

QUAN, MICHELE, MD†
Provider ID: N/A
🎉 2125 CITRACADO PKWY STE 230
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

RAKONEN, TERRY, MD²
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

VALLEZ-BARLAM, ANDREA, PhD
Provider ID: N/A
🎉 488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Effective as of 01-DEC-23

PULMONARY DISEASES

BENDER, FRANK, MD
Provider ID: N/A
🎉 2125 CITRACADO PKWY STE 230
ESCONDIDO, CA 92029
Effective as of 01-FEB-24

QUAN, MICHELE, MD†
Provider ID: N/A
🎉 2125 CITRACADO PKWY STE 230
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

rz

RADIATION ONCOLOGY

IJAZ, TAHIR, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†
Provider ID: N/A
🎉 701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21
C1. 網絡內提供者清單

專科護理醫師

JABBARI, SIAVASH, MD
Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHIRAZI, REZA, MD
Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHIRAZI, REZA, MD
Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-SEP-22

SHIRAZI, REZA, MD
Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SHIRAZI, REZA, MD
Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Effective as of 01-JUL-22

VAKILIAN, SIAVOSH, MD
Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD
Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

VOLPP, PAUL, MD
Provider ID: N/A
2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-SEP-22

WEINSTEIN, GEOFFREY, MD
Provider ID: N/A
2125 CITRACADO PKWY
STE 110
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

RADIOLOGY DIAGNOSTIC

VAKILIAN, SIAVOSH, MD
Provider ID: N/A
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-SEP-22

BOUTELLE, DAVID, PT
Provider ID: N/A
1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

BOUTELLE, BARBARA, PT
Provider ID: N/A
1815 E VALLEY PKWY STE 5
ESCONDIDO, CA 92027
Effective as of 01-SEP-22

FARRAR, COURTNEY, PT
Provider ID: N/A
1955 CITRACADO PKWY
STE 203
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-JUL-23

MCgee, Jacqueline, PT
Provider ID: N/A
1340 W VALLEY PKWY STE 201
ESCONDIDO, CA 92029
Effective as of 01-JAN-21

SPEECH PATHOLOGIST

CALDERON MORALES, ASTRID, SP
Provider ID: N/A
500 LA TERRAZA BLVD STE 150
ESCONDIDO, CA 92025
Effective as of 01-APR-24

KOUKEYAN, KARIN, SP
Provider ID: N/A
500 LA TERRAZA BLVD STE 150
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SURGERY GENERAL
C1. 網絡內提供者清單
専科護理醫師

CASILLAS BERUMEN, SERGIO, MD
Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

GROVE, JAY, MD†
Provider ID: N/A

2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Teleservice
Effective as of 01-JAN-21

MOLDOVAN, STEFAN, MD†
Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

MOLDOVAN, STEFAN, MD†
Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-24

SALLOUM, ALEXANDER, MD†
Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-JAN-23

STERN, MARK, MD†
Provider ID: N/A

705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

BARBA, DANIEL, MD
Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-MAR-24

KNUTSON, THOMAS, MD
Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

PALANCA, ARIEL, MD
Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-24

RAISZADEH, Ramin, MD†
Provider ID: N/A

2130 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Effective as of 01-JAN-23

RAISZADEH, Ramin, MD†
Provider ID: N/A

488 E VALLEY PKWY STE 316
ESCONDIDO, CA 92025
Effective as of 01-JAN-23

SHARP, LORRA, MD
Provider ID: N/A

625 CITRACADO PKWY STE 203
ESCONDIDO, CA 92025
Effective as of 01-AUG-20

MORENO MARTINEZ, ENRIQUE, MD†
Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Effective as of 01-FEB-24

NEMCEFF, DENNIS, MD†
Provider ID: N/A

625 CITRACADO PKWY STE 203
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†
Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD†
Provider ID: N/A

1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Teleservice
Effective as of 01-MAR-24

SURGERY GENERAL

VASCULAR

BULKIN, ANATOLY, MD†
Provider ID: N/A

625 CITRACADO PKWY STE 203
ESCONDIDO, CA 92025
Effective as of 01-MAR-24

CHANG, ALEXANDER, MD†
Provider ID: N/A

625 CITRACADO PKWY STE 203
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

Surgery Neurological

STERN, MARK, MD†
Provider ID: N/A

705 E OHIO AVE
ESCONDIDO, CA 92025
Effective as of 01-JAN-21

SHARP, LORRA, MD
Provider ID: N/A
C1. 網絡內提供者清單

 專科護理醫生

<table>
<thead>
<tr>
<th>Provider</th>
<th>Address</th>
<th>Effective as of</th>
</tr>
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<tr>
<td>LIN, YUAN, MD</td>
<td>2130 CITRACADO PKWY STE 200, ESCONDIDO, CA 92029</td>
<td>01-MAR-23</td>
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<tr>
<td>ANTHONY, JULIAN, MD</td>
<td>1955 CITRACADO PKWY STE 200, ESCONDIDO, CA 92029</td>
<td>01-JAN-24</td>
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<td>2130 CITRACADO PKWY STE 210, ESCONDIDO, CA 92029</td>
<td>01-MAR-24</td>
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<tr>
<td>SANGODKAR, SANDEEP, DO²</td>
<td>591 E ELDER ST STE C FALLBROOK, CA 92028</td>
<td>01-MAR-20</td>
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<tr>
<td>SANGODKAR, SANDEEP, DO²</td>
<td>591 E ELDER ST STE C FALLBROOK, CA 92028</td>
<td>01-MAR-20</td>
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<tr>
<td>LAROWE, ALEXISS, LAC†</td>
<td>1309 S MISSION RD FALLBROOK, CA 92028</td>
<td>01-JUL-21</td>
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<tr>
<td>LAROWE, ALEXISS, LAC†</td>
<td>1309 S MISSION RD FALLBROOK, CA 92028</td>
<td>01-JUL-21</td>
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<tr>
<td>LAROWE, ALEXISS, LAC†</td>
<td>1309 S MISSION RD FALLBROOK, CA 92028</td>
<td>01-JUL-21</td>
</tr>
<tr>
<td>WACHNER, KRISTELYN, LAC†</td>
<td>1309 S MISSION RD FALLBROOK, CA 92028</td>
<td>01-OCT-22</td>
</tr>
<tr>
<td>WACHNER, KRISTELYN, LAC†</td>
<td>1309 S MISSION RD FALLBROOK, CA 92028</td>
<td>01-OCT-22</td>
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<tr>
<td>HAMED, JACQUELYN, NP</td>
<td>1328 S MISSION RD FALLBROOK, CA 92028</td>
<td>01-NOV-23</td>
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<td>KELLEHER, BRIDGET, NP</td>
<td>1328 S MISSION RD FALLBROOK, CA 92028</td>
<td>01-JUL-22</td>
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<tr>
<td>321 E ALVARADO ST FALLBROOK, CA 92028</td>
<td>01-APR-28</td>
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<tr>
<td>STARICKA, MELISSA, NPF</td>
<td>1328 S MISSION RD FALLBROOK, CA 92028</td>
<td>01-FEB-23</td>
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<td>1955 CITRACADO PKWY STE 200, ESCONDIDO, CA 92029</td>
<td>01-MAR-24</td>
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</tbody>
</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-SEP-22

ROSS, ANDREW, MD†
Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†
Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-AUG-20

SAMADY, JOSEPH, MD†
Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†
Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-JUL-22

GASTROENTEROLOGY
HONG, JOHN, MD†
Provider ID: N/A
521 E ELDER ST STE 104
FALLBROOK, CA 92028
Effective as of 01-JAN-21

INTERNAL MEDICINE
COX, JEREMY, DO
Provider ID: N/A
591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-NOV-23

MOOLANI, UJJALA, MD
Provider ID: N/A
591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

INTERVENTIONAL CARDIOLOGY
BISWAS, MIMI, MD
Provider ID: N/A
591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

NEPHROLOGY
AL-DAHHAN, ZAID, MD
Provider ID: N/A
591 E ELDER ST STE C
FALLBROOK, CA 92028
Effective as of 01-MAY-23

NAGASUNDER, ARABHI, DO
Provider ID: N/A
591 E ELDER ST STE C
FALLBROOK, CA 92028
Teleservice
Effective as of 01-FEB-24

NEUROLOGY
UDDIN, MOHAMMAD, MD†
Provider ID: N/A
577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-23

UDDIN, MOHAMMAD, MD†
Provider ID: N/A
577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-15

WONG, DARRYL, MD†
Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
C1. 網絡內提供者清單

專科護理醫師

DONALDSON, JARED, MD†
Provider ID: N/A
577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A
577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-OCT-20

UDDIN, MOHAMMAD, MD†
Provider ID: N/A
577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-JUL-19

UDDIN, MOHAMMAD, MD†
Provider ID: N/A
577 E ELDER ST STE E
FALLBROOK, CA 92028
Effective as of 01-APR-22

OBSTETRICS / GYNECOLOGY

STIGEN, THERESA, MD†
Provider ID: N/A
577 E ELDER ST STE K
FALLBROOK, CA 92028
Effective as of 01-SEP-17

OPHTHALMOLOGY

DONALDSON, JARED, MD†
Provider ID: N/A
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

DONALDSON, JARED, MD†
Provider ID: N/A
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-DEC-22

COLEMAN, BROOKE, OD†
Provider ID: N/A
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-FEB-22

COOPER, MICHAEL, OD†
Provider ID: N/A
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Effective as of 01-SEP-22

PEDIATRICS

ROBINSON, DAISY, MD
Provider ID: N/A
321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-MAY-23

RONAN, KEVIN, MD
Provider ID: N/A
321 E ALVARADO ST
FALLBROOK, CA 92028
Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

SERING, MALIA, PA†
Provider ID: N/A
1309 S MISSION RD STE A
FALLBROOK, CA 92028
Effective as of 01-SEP-22

PODIATRIST

FARMER, STEVEN, DPM†
Provider ID: N/A
1309 S MISSION RD
FALLBROOK, CA 92028
Effective as of 01-JUL-22

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. Network Providers List

FALL BROOK, CA 92028
Effective as of 01-JUL-21

FARMER, STEVEN, DPM\[^{1}\]
Provider ID: N/A
1309 S MISSION RD
FALL BROOK, CA 92028
Effective as of 01-JUL-22

NEGRON, RICARDO, DPM
Provider ID: N/A
1309 S MISSION RD
FALL BROOK, CA 92028
Effective as of 01-JUL-22

NEGRON, RICARDO, DPM
Provider ID: N/A
1309 S MISSION RD
FALL BROOK, CA 92028
Effective as of 01-JUL-21

ALLERGY IMMUNOLOGY

PANGANIBAN, CHRISTINE, MD\[^{1}\]
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-22

YOSHII, DENIS, DO\[^{1}\]
Provider ID: N/A
26750 TOWNE CENTRE DR STE D
FOOTHILL RANCH, CA 92610
Effective as of 01-APR-23

YOSHII, DENIS, DO\[^{1}\]
Provider ID: N/A
26750 TOWNE CENTRE DR STE D
FOOTHILL RANCH, CA 92610
Effective as of 01-APR-23

YOSHII, DENIS, DO\[^{1}\]
Provider ID: N/A
26750 TOWNE CENTRE DR STE D
FOOTHILL RANCH, CA 92610
Effective as of 01-JAN-18

CERTIFIED NURSE PRACTITIONER

AHADIAT, OMEED, MD
Provider ID: N/A
26700 TOWNE CENTRE DR STE 170
FOOTHILL RANCH, CA 92610
Effective as of 01-DEC-23

LIU, GRACE, NP
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-MAY-23

LIU, GRACE, NP
Provider ID: N/A
26672 PORTOLA PKWY
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

SORIA, JULIE, NP
Provider ID: N/A
26672 PORTOLA PKWY
FOOTHILL RANCH, CA 92610*
Effective as of 01-APR-22

CHIROPRACTOR

TUREK, PAUL, DC
Provider ID: N/A
27462 PORTOLA PKWY STE 201
FOOTHILL RANCH, CA 92610
Effective as of 01-JUL-21

DERMATOLOGY

AHADIAT, OMEED, MD
Provider ID: N/A
26700 TOWNE CENTRE DR STE 170
FOOTHILL RANCH, CA 92610
Effective as of 01-DEC-23

ENDOCRINOLOGY

METABOLISM DIABETES

AHL, SCOTT, DO\[^{1}\]
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-22
GASTROENTEROLOGY

ASHBY, KEVIN, MD
Provider ID: N/A
26700 TOWNE CENTRE DR STE 100
FOOTHILL RANCH, CA 92610
Effective as of 01-MAR-20

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-SEP-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-SEP-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-SEP-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-SEP-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-SEP-22

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

ASHRAF, HEBA, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

LEE, PAUL, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

OMAN, MATTHEW, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

YU, VICTOR, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

YU, VICTOR, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

OBSTETRICS / GYNECOLOGY

DAVIS, STEPHANIE, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 108
FOOTHILL RANCH, CA 92610
Effective as of 01-FEB-23

DEJBAKHSH, SHEILA, MD
Provider ID: N/A
C1. 網絡內提供者清單

專科護理醫師

MILLER, JAMIE, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 180
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-22

PETERS, AMY, DO
Provider ID: N/A
26672 PORTOLA PKWY STE 108
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-23

PETERS, AMY, DO
Provider ID: N/A
26672 PORTOLA PKWY STE 180
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-23

PRICE, KERRY, MD
Provider ID: N/A
26672 PORTOLA PKWY STE 108
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-23

PHYSICIANS ASSISTANT

DUGGAN, VERONICA, PA
Provider ID: N/A
26672 PORTOLA PKWY STE 100
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-22

WU, VANNA, PA
Provider ID: N/A
26672 PORTOLA PKWY STE 104
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-24

PULMONARY DISEASES

FRANKLIN RUTLAND, CEDRIC, MD²
Provider ID: N/A
26672 PORTOLA PKWY
FOOTHILL RANCH, CA 92610
Effective as of 01-JAN-23

RHEUMATOLOGY

MAHMOOD, FARAH, MD†
Provider ID: N/A
26700 TOWNE CENTRE DR STE 165
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-19

SURGERY GENERAL

SALEM, YASSER, MD†
Provider ID: N/A
26700 TOWNE CENTRE DR STE 165
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-19

SALEM, YASSER, MD†
C1. 網絡內提供者清單

網絡內提供者清單

专科護理醫師

Provider ID: N/A
26781 PORTOLA PKWY STE 4E
FOOTHILL RANCH, CA 92610
Effective as of 01-AUG-13

SALEM, YASSER, MD
Provider ID: N/A
26781 PORTOLA PKWY STE 4E
FOOTHILL RANCH, CA 92610
Effective as of 01-AUG-17

DANESHMAND, HOOTAN, MD
Provider ID: N/A
27462 PORTOLA PKWY STE 100
FOOTHILL RANCH, CA 92610
Effective as of 01-APR-11

DANESHMAND, HOOTAN, MD
Provider ID: N/A
27462 PORTOLA PKWY STE 100
FOOTHILL RANCH, CA 92610
Effective as of 01-OCT-22

DANESHMAND, HOOTAN, MD
Provider ID: N/A
27462 PORTOLA PKWY STE 100
FOOTHILL RANCH, CA 92610
Effective as of 01-JAN-18

DANESHMAND, HOOTAN, MD
Provider ID: N/A
27462 PORTOLA PKWY STE 100
FOOTHILL RANCH, CA 92610
Effective as of 01-MAY-15

DANESHMAND, HOOTAN, MD
Provider ID: N/A
27462 PORTOLA PKWY STE 100
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-14

DANESHMAND, HOOTAN, MD
Provider ID: N/A
27462 PORTOLA PKWY STE 100
FOOTHILL RANCH, CA 92610
Effective as of 01-NOV-17

DANESHMAND, HOOTAN, MD
Provider ID: N/A
27462 PORTOLA PKWY STE 100
FOOTHILL RANCH, CA 92610
Effective as of 01-MAY-15

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†
Provider ID: N/A
1000 E LATHAM AVE STE B
HEMET, CA 92543
Effective as of 01-FEB-22

BROWN, HOSEA, MD†
Provider ID: N/A
1000 E LATHAM AVE STE B
HEMET, CA 92543
Effective as of 01-JUL-23

BROWN, HOSEA, MD†
Provider ID: N/A
1000 E LATHAM AVE STE B
HEMET, CA 92543
Effective as of 01-MAY-15

SALEH, HANA, MD†
Provider ID: N/A
391 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-15

ANESTHESIOLOGY

DORAISWAMY, ARUL, MD†
Provider ID: N/A
1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-NOV-14

DORAISWAMY, ARUL, MD†
Provider ID: N/A
1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-NOV-17

GUIANG, RAINIER, MD†
Provider ID: N/A
3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAY-15

JEDAMSKI, WALDTRAUT, MD
Provider ID: N/A
1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-OCT-19

PANG, GARY, MD†
Provider ID: N/A
3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAR-24

ANESTHESIOLOGY PAIN MANAGEMENT

CHEN, HAMILTON, MD†
Provider ID: N/A
3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAY-21

DORAISWAMY, ARUL, MD†
Provider ID: N/A
1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-NOV-14

DORAISWAMY, ARUL, MD†
Provider ID: N/A
1264 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-NOV-17

GUIANG, RAINIER, MD†
Provider ID: N/A
3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAR-24

GUIANG, RAINIER, MD†
Provider ID: N/A
 signings w STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAY-21

KANU, ABDUL, MD
Provider ID: N/A
 signs 1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-JUN-21

LEIER, TIM, MD
Provider ID: N/A
1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-SEP-19

PANG, GARY, MD†
Provider ID: N/A
 signings w STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAY-21

CARDIOVASCULAR
DISEASE

AGARWAL, ASHOK, MD
Provider ID: N/A
136 S SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-JUL-23

AGARWAL, SAURABH, MD†
Provider ID: N/A
949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-DEC-21

AGARWAL, SAURABH, MD†
Provider ID: N/A
949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-22

AMIN, JATIN, MD†
Provider ID: N/A
signings w STETSON AVE STE 104
HEMET, CA 92545
Effective as of 01-SEP-19

AMIN, JATIN, MD†
Provider ID: N/A
949 CALHOUN PL STE D
HEMET, CA 92543
Effective as of 01-AUG-22

ATTIA, NADER, DO†
Provider ID: N/A
3853 W STETSON AVE STE 104
HEMGET, CA 92545
Effective as of 01-MAR-19

ATTIA, NADER, DO†
Provider ID: N/A
3853 W STETSON AVE STE 104
HEMGET, CA 92545
Effective as of 01-MAY-21

ATTIA, NADER, DO†
Provider ID: N/A
3853 W STETSON AVE STE 104
HEMGET, CA 92545
Effective as of 01-SEP-18

BISWAS, MIMI, MD†
Provider ID: N/A
3853 W STETSON AVE STE 104
HEMGET, CA 92545
Effective as of 01-SEP-18

COX, JEREMY, DO†
Provider ID: N/A
3853 W STETSON AVE STE 104
HEMGET, CA 92545
Effective as of 01-SEP-18

GRANT ANDERSON, BETTY,
MD†
Provider ID: N/A
949 CALHOUN PL STE D
HEMGET, CA 92543
Effective as of 01-AUG-23

PAREKH, NIRAJ, MD†
Provider ID: N/A
3853 W STETSON AVE STE 104
HEMGET, CA 92545
Effective as of 01-SEP-18

PAREKH, NIRAJ, MD†
Provider ID: N/A
3853 W STETSON AVE STE 104
HEMGET, CA 92545
Effective as of 01-SEP-18

205
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<tr>
<td>RASTOGI, ANIL, MD†</td>
<td>N/A</td>
<td>1275 E LATHAM AVE STE A</td>
<td>01-AUG-20</td>
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<tr>
<td>RASTOGI, ANISHA, MD†</td>
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<td>RASTOGI, ANIL, MD†</td>
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<td>ADEGBITE, ADEKUNLE, NP†</td>
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<td>162 N SANTA FE ST</td>
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**Certified Nurse Practitioner**

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<td>ADEDAYO, TOLULOPE, NP†</td>
<td>N/A</td>
<td>422 N SAN JACINTO ST STE A</td>
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Your PCP’s provider group may have their own network to provide mental health services. Please refer to the below list. You can directly contact these providers. Please note, some services may require mental health providers to obtain prior authorization from Blue Shield before the service can be covered. For online access to the provider list, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單
專科護理醫師

AMJAD, NP
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

ANUFORO, CHINWE, NP
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-23

ANUFORO, CHINWE, NP
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-23

BAKER, SERENA, NP
Provider ID: N/A
3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-MAY-23

BAKER, SERENA, NP
Provider ID: N/A
3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-JUL-23

BAKER, SERENA, NP
Provider ID: N/A
3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-JUL-23

BEDFORD, RONALD, NP
Provider ID: N/A
850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-SEP-22

BEDFORD, RONALD, NP
Provider ID: N/A
850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-OCT-22

BRASKET, ADAM, NP
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

BRASKET, ADAM, NP
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

BRASKET, ADAM, NP
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

BRASKET, ADAM, NP
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-DEC-22

HUERTA, CARMEN, NP
Provider ID: N/A
850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-22

HUERTA, CARMEN, NP
Provider ID: N/A
850 E LATHAM AVE STE 201
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Effective as of 01-AUG-22

HUERTA, CARMEN, NP
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Effective as of 01-AUG-22

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Effective as of 01-AUG-22

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Effective as of 01-DEC-22

HUERTA, CARMEN, NP
Provider ID: N/A
850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-DEC-22

HUERTA, CARMEN, NP
Provider ID: N/A
850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-DEC-22

IGWE, CHINWENDU, NP
Provider ID: N/A
3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-AUG-19

IGWE, CHINWENDU, NP
Provider ID: N/A
3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-DEC-22
C1. 網絡內提供者清單
専科護理醫生

Effective as of 01-JAN-20

IHEMEDU, MAGNUS, NPF
Provider ID: N/A
📍 162 N SANTA FE ST
   HEMET, CA 92543
Effective as of 01-JUL-23

IHEMEDU, MAGNUS, NPF
Provider ID: N/A
📍 162 N SANTA FE ST
   HEMET, CA 92543
Effective as of 01-DEC-22

IHEMEDU, MAGNUS, NPF
Provider ID: N/A
📍 162 N SANTA FE ST
   HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF
Provider ID: N/A
📍 162 N SANTA FE ST
   HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF
Provider ID: N/A
📍 162 N SANTA FE ST
   HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, AMARACHI, NPF
Provider ID: N/A
📍 162 N SANTA FE ST
   HEMET, CA 92543
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF
Provider ID: N/A
📍 162 N SANTA FE ST
   HEMET, CA 92543
Effective as of 01-APR-23

JOHNSON, KIMBERLY, NP†
Provider ID: N/A
📍 3989 W STETSON AVE STE 202
   HEMET, CA 92545
Effective as of 01-MAY-23

JOHNSON, KIMBERLY, NP†
Provider ID: N/A
📍 3989 W STETSON AVE STE 202
   HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†
Provider ID: N/A
📍 3989 W STETSON AVE STE 202
   HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†
Provider ID: N/A
📍 3989 W STETSON AVE STE 202
   HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†
Provider ID: N/A
📍 3989 W STETSON AVE STE 202
   HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, KIMBERLY, NP†
Provider ID: N/A
📍 3989 W STETSON AVE STE 202
   HEMET, CA 92545
Effective as of 01-SEP-22

MAGNUS, NPF

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
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<tr>
<td>PAULHUS, PATRICIA, NP†</td>
<td>3989 W STETSON AVE STE 202, HEMET, CA 92545</td>
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<td>RATAJCZAK, CELESTE, NP</td>
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<td>SALAS-AMIGON, BRENDA, NP†</td>
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<td>SANCHEZ, YAHAIRA, NP†</td>
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VIDAL, ALYSSA, NPF
Provider ID: N/A
3989 W STETSON AVE STE 202
HEMET, CA 92545
Effective as of 01-SEP-23

CHIROPRACTOR

BROWN, KEVIN, DC
Provider ID: N/A
3012 W FLORIDA AVE
HEMET, CA 92545
Effective as of 01-AUG-23

WILLIAM, PHEBEE, NP†
Provider ID: N/A
162 N SANTA FE ST
HEMET, CA 92543
Effective as of 01-MAY-21

HINES, TAYTE, DC
Provider ID: N/A
903 E DEVONSHIRE AVE STE D
HEMET, CA 92543
Effective as of 01-JUL-22

DERMATOLOGY

HARFORD, ROBERT, MD†
Provider ID: N/A
750 E LATHAM AVE STE 3
HEMET, CA 92543
Effective as of 01-DEC-20

MITCHELL, JESSE, MD
Provider ID: N/A
3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-JUL-22
C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-DEC-23

MITCHELL, JESSE, MD
Provider ID: N/A
3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

MITCHELL, JESSE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-JUL-21

MUDGE, BRADLEY, MD†
Provider ID: N/A
850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-JUL-14

EMERGENCY MEDICINE
MATHUR, ARVIND, MD†
Provider ID: N/A
975 SAINT JOHN PL
HEMET, CA 92543
Effective as of 01-APR-23

ENDOCRINOLOGY
METABOLISM DIABETES
HAIDER, UZMA, MD†
Provider ID: N/A
1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-APR-24

SAIED, NAGI, MD†
Provider ID: N/A
850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-NOV-21

SAIED, NAGI, MD†
Provider ID: N/A
850 E LATHAM AVE STE 201
HEMET, CA 92543
Teleservice
Effective as of 01-OCT-21

SEYFZADEH, MANOUCHEHR, MD†
Provider ID: N/A
1280 E LATHAM AVE
HEMET, CA 92543
Effective as of 01-JUL-14

OBEREMOK, STEVE, MD
Provider ID: N/A
901 S STATE ST STE 100
HEMET, CA 92543
Effective as of 01-AUG-23

OBEREMOK, STEVE, MD
Provider ID: N/A
720 E LATHAM AVE STE 1
HEMET, CA 92543
Effective as of 01-JUL-23

HAIDER, SHANZAY, MD
Provider ID: N/A
1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD
Provider ID: N/A
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HEMET, CA 92543
Effective as of 01-MAR-24

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Provider ID: N/A
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HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD
Provider ID: N/A
1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

HAIDER, SHANZAY, MD
Provider ID: N/A
1515 W FLORIDA AVE
HEMET, CA 92543
Effective as of 01-MAR-24

SAIED, NAGI, MD†
Provider ID: N/A
850 E LATHAM AVE STE 201
HEMET, CA 92543
Effective as of 01-AUG-20
### FAMILY PRACTICE

**CHAMBI-HERNANDEZ, RUTH, MD**  
Provider ID: N/A  
1035 SAINT JOHN PL  
HEMET, CA 92543  
Effective as of 01-MAY-23

**GASTROENTEROLOGY**

**CHAKRABARTY, MILANKUMAR, MD†**  
Provider ID: N/A  
1003 E FLORIDA AVE STE 101  
HEMET, CA 92543  
Effective as of 01-SEP-09

**CHAKRABARTY, MILANKUMAR, MD†**  
Provider ID: N/A  
1003 E FLORIDA AVE STE 101  
HEMET, CA 92543  
Effective as of 01-AUG-20

**CHAKRABARTY, MILANKUMAR, MD†**  
Provider ID: N/A  
1003 E FLORIDA AVE STE 101  
HEMET, CA 92543  
Effective as of 01-JUL-23

**QASEEM, TAHIR, MD**  
Provider ID: N/A  
1003 E FLORIDA AVE STE 101  
HEMET, CA 92543  
Effective as of 01-MAY-22

**QASEEM, TAHIR, MD**  
Provider ID: N/A  
1003 E FLORIDA AVE STE 104  
HEMET, CA 92543  
Effective as of 01-DEC-22

**SINGHVI, AJEET, MD†**  
Provider ID: N/A  
397 N SAN JACINTO ST  
HEMET, CA 92543  
Effective as of 01-DEC-17

**HEMATOLOGY / ONCOLOGY**

**AGAJANIAN, RICHY, MD**  
Provider ID: N/A  
1001 S STATE ST STE A  
HEMET, CA 92543  
Effective as of 01-JUL-23

**BANTA, WARREN, MD†**  
Provider ID: N/A  
2390 E FLORIDA AVE STE 105  
HEMET, CA 92544  
Effective as of 01-AUG-22

**BANTA, WARREN, MD†**  
Provider ID: N/A  
2390 E FLORIDA AVE STE 105  
HEMET, CA 92544  
Effective as of 01-AUG-22
C1. 網絡內提供者清單

專科護理醫師

BANTA, WARREN, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 105
HEMET, CA 92544
Effective as of 01-OCT-23

LEE, BYUNG, DO†
Provider ID: N/A
2390 E FLORIDA AVE STE 105
HEMET, CA 92544
Effective as of 01-OCT-23

BANTA, WARREN, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 105
HEMET, CA 92544
Effective as of 01-AUG-22

BANTA, WARREN, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 105
HEMET, CA 92544
Effective as of 01-AUG-22

BASERI, BABAK, MD
Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

BELLO, OSAGIE, MD
Provider ID: N/A
2390 E FLORIDA AVE STE 105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 105
HEMET, CA 92544
Effective as of 01-SEP-18

MOST, CAROLE, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 105
HEMET, CA 92544
Effective as of 01-SEP-18

SARWARI, NAWID, MD
Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO
Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-23

SAUNDERS, PHILLIP, DO
Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-APR-24

SAUNDERS, PHILLIP, DO†
Provider ID: N/A
1011 E DEVONSHIRE AVE STE 201
HEMET, CA 92543
Effective as of 01-DEC-20

SCHWERKOSKE, JOHN, MD
Provider ID: N/A
1001 S STATE ST STE A
HEMET, CA 92543
Effective as of 01-JUL-23
### C1. 網絡內提供者清單

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<td><strong>RIVA, GREGORY, MD†</strong></td>
<td>Provider ID: N/A</td>
<td>949 CALHOUN PL STE D HEMET, CA 92543</td>
<td>Effective as of 01-JUN-17</td>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
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<tr>
<td>Taecharvongphairoj, Veeravat, MD</td>
<td>N/A</td>
<td>1030 E Florida Ave</td>
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<tr>
<td>Internal Medicine, Geriatric Medicine</td>
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<td>Mathias, Herman, MD†</td>
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<td>391 N San Jacinto St</td>
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<td>Parekh, Niraj, MD†</td>
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<td>N/A</td>
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<td>01-JAN-19</td>
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<td>3853 W Stetson Ave STE</td>
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<td>Amin, Jatin, MD†</td>
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<td>3853 W Stetson Ave STE</td>
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您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
C1. 網絡內提供者清單

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C1. 網絡內提供者清單
專科護理醫師

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<tr>
<td>VALDEZ-HERNANDEZ, ISRAEL, LCSW†</td>
<td>MARRIAGE FAMILY THERAPIST</td>
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<td>POOR, PATRICK, MFT†</td>
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<td>01-DEC-22</td>
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<tr>
<td>CHANG, DAVID, MD†</td>
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<td>CHARLES COWAN, TRICIA, DO†</td>
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### Network Providers List

**HEMET, CA 92545**

**DHIMAN, DARSHAN, MD**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-MAR-21

**DHIMAN, DARSHAN, MD**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-APR-18

**DHIMAN, DARSHAN, MD**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-DEC-15

**DHIMAN, DARSHAN, MD**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-DEC-15

**DHIMAN, DARSHAN, MD**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-DEC-15

**ISHAK, SALAM, MD**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-AUG-20

**NAGASUNDER, ARABHI, DO**
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-APR-20

**DHEAR, ARABHI, DO**
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-APR-20

**YAN, ERIC, MD**
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-JUN-23

**YAN, ERIC, MD**
- Provider ID: N/A
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- HEMET, CA 92545
- Effective as of 01-JUN-23

**YAN, ERIC, MD**
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- Effective as of 01-JUN-23

**YAN, ERIC, MD**
- Provider ID: N/A
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- HEMET, CA 92545
- Effective as of 01-JUN-23

**YOUSSEF, AMR, DO**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-SEP-22

**YOUSSEF, AMR, DO**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-SEP-22

**YOUSSEF, AMR, DO**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-JUN-23

**NATH, ASHOK, MD**<sup>†</sup>
- Provider ID: N/A
- Address: 3889 W STETSON AVE STE 100
- HEMET, CA 92545
- Effective as of 01-OCT-23

**NATH, ASHOK, MD**<sup>†</sup>
- Provider ID: N/A
- Address: 3989 W STETSON AVE STE 202
- HEMET, CA 92545
- Effective as of 01-OCT-23

**OBSTETRICS /**
C1. 網絡內提供者清單

**GYNECOLOGY**

NIHIRA, MIKIO, MD†
Provider ID: N/A
iciency as of 01-NOV-20

NIHIRA, MIKIO, MD†
Provider ID: N/A
iciency as of 01-NOV-20

NIHIRA, MIKIO, MD†
Provider ID: N/A
iciency as of 01-NOV-20

RIZVI, SYED, MD†
Provider ID: N/A
iciency as of 01-FEB-17

RIZVI, SYED, MD†
Provider ID: N/A
iciency as of 01-MAR-22

URSO, MARY JO, DO†
Provider ID: N/A
iciency as of 01-DEC-20

URSO, MARY JO, DO†
Provider ID: N/A
iciency as of 01-DEC-20

URSO, MARY JO, DO†
Provider ID: N/A
iciency as of 01-DEC-20

JENSEN, BROOKE, OT†
Provider ID: N/A
iciency as of 01-JAN-20

JENSEN, BROOKE, OT†
Provider ID: N/A
iciency as of 01-MAY-21

CARLSON, JOHN, MD†
Provider ID: N/A
iciency as of 01-AUG-20

CARLSON, JOHN, MD†
Provider ID: N/A
iciency as of 01-FEB-22

CARLSON, JOHN, MD†
Provider ID: N/A
iciency as of 01-MAY-14

CHOW, JASON, MD†
Provider ID: N/A

**OPHTHALMOLOGY**

BONILLA, EDWARD, OT
Provider ID: N/A
iciency as of 01-DEC-20

BONILLA, EDWARD, OT
Provider ID: N/A
iciency as of 01-DEC-20

BONILLA, EDWARD, OT
Provider ID: N/A
iciency as of 01-DEC-20

**OCCUPATIONAL THERAPIST**

BONILLA, EDWARD, OT
Provider ID: N/A
iciency as of 01-DEC-20

BONILLA, EDWARD, OT
Provider ID: N/A
iciency as of 01-MAY-14
C1. 網絡內提供者清單

專科護理醫師

CHOW, JASON, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JUL-23

CHOW, JASON, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-FEB-24

CHOW, JASON, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

DONALDSON, JARED, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-OCT-22

DONALDSON, JARED, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-22

DONALDSON, JARED, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-09

JOSEPH, JEFFREY, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21

JOSEPH, JEFFREY, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-19

LEE, JOHN, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 207
HEMET, CA 92544
Effective as of 01-JAN-11

LEE, JOHN, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 207
HEMET, CA 92544
Effective as of 01-FEB-11

LEE, JOHN, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 207
HEMET, CA 92544
Effective as of 01-MARCH-98
C1. 網絡內提供者清單

網絡內提供者清單

專科護理醫師

LEE, JOHN, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 207
HEMET, CA 92544
Effective as of 01-MAR-14

NAMBIAR, MARGARET, MD†
Provider ID: N/A
2390 E FLORIDA AVE STE 207
HEMET, CA 92544
Effective as of 01-FEB-20

PHILLIPS, BARRATT, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-MAY-14

PHILLIPS, BARRATT, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-SEP-09

SHELTON, RAYMOND, MD
Provider ID: N/A

SKINNER, ANTHONY, MD
Provider ID: N/A
2390 E FLORIDA AVE STE 207
HEMET, CA 92544
Effective as of 01-MAY-23

SKINNER, ANTHONY, MD
Provider ID: N/A
2390 E FLORIDA AVE STE 207
HEMET, CA 92544
Effective as of 01-APR-24

SORENSON, ROBERT, MD†
Provider ID: N/A
3953 W STETSON AVE
HEMET, CA 92545
Effective as of 01-DEC-21

OPTOMETRIST
### C1. 網絡內提供者清單

<table>
<thead>
<tr>
<th>醫師名稱</th>
<th>職稱</th>
<th>ID</th>
<th>地址</th>
<th>有效日期</th>
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<tr>
<td>ARCHIBALD, JOHN, OD</td>
<td>医师</td>
<td>N/A</td>
<td>3953 W STETSON AVE HEMET, CA 92545</td>
<td>01-DEC-23</td>
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<tr>
<td>BARR, AUSTIN, OD</td>
<td>医师</td>
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<td>COLEMAN, BROOKE, OD</td>
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<td>FENNEMA, ERIC, OD</td>
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<td>01-AUG-18</td>
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<td>N/A</td>
<td>3953 W STETSON AVE HEMET, CA 92545</td>
<td>01-DEC-21</td>
</tr>
</tbody>
</table>

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
207
HEMET, CA 92544
Effective as of 01-JUL-23

ULIBARRI, MATTHEW, OD†
Provider ID: N/A
2390 E FLORIDA AVE STE 207
HEMET, CA 92544
Effective as of 01-JUL-23

207
HEMET, CA 92544
Effective as of 01-JUL-23

LEE, JONATHAN KWANG, MD†
Provider ID: N/A
3889 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-MAR-24

PHYSICAL MEDICINE / REHABILITATION

AILINANI, HARY, MD
Provider ID: N/A
1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543
Effective as of 01-OCT-10

CHEN, HAMILTON, MD†
Provider ID: N/A

3989 W STETSON AVE STE 102
HEMET, CA 92545
Effective as of 01-JUL-23

NIKACHINA, ANNA, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAY-21

CIMALDE, ALAN, PA²
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-20

CERALDE, ALAN, PA²
Provider ID: N/A
422 N SAN JACINTO ST STE B-C
HEMET, CA 92543
Effective as of 01-AUG-20

Baker, Robert, PA
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAY-21

Baker, Robert, PA
Provider ID: N/A
1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

Baker, Robert, PA
Provider ID: N/A
1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

Baker, Robert, PA
Provider ID: N/A
1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

Baker, Robert, PA
Provider ID: N/A
1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

Baker, Robert, PA
Provider ID: N/A
1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543
Effective as of 01-MAR-24

CAGATAY, HARRIER, PA²
Provider ID: N/A
1011 E DEVONSHIRE AVE
HEMET, CA 92543
Effective as of 01-AUG-20

CAGATAY, HARRIER, PA²
Provider ID: N/A
422 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-AUG-20

CERALDE, ALAN, PA²
Provider ID: N/A
3889 W STETSON AVE
HEMET, CA 92545
Effective as of 01-NOV-16

CERALDE, ALAN, PA²
Provider ID: N/A
3889 W STETSON AVE
HEMET, CA 92545
Effective as of 01-AUG-16
C1. 網絡內提供者清單
專科護理醫師

CERALDE, ALAN, PA†
Provider ID: N/A
☞ 3889 W STETSON AVE STE 100
    HEMET, CA 92545
Effective as of 01-AUG-16

CERALDE, ALAN, PA†
Provider ID: N/A
☞ 3889 W STETSON AVE STE 100
    HEMET, CA 92545
Effective as of 01-AUG-16

CURTIS, DANIEL, PA†
Provider ID: N/A
☞ 949 CALHOUN PL STE D
    HEMET, CA 92543
Effective as of 01-MAY-23

CURTIS, DANIEL, PA†
Provider ID: N/A
☞ 949 CALHOUN PL STE D
    HEMET, CA 92543
Effective as of 01-DEC-22

CURTIS, DANIEL, PA†
Provider ID: N/A
☞ 949 CALHOUN PL STE D
    HEMET, CA 92543
Effective as of 01-DEC-22

DE CARO, ROBERT, PA†
Provider ID: N/A
☞ 1264 E LATHAM AVE
    HEMET, CA 92543
Effective as of 01-OCT-19

DIETZLER, MARQUE, PA†
Provider ID: N/A
☞ 4020 W FLORIDA AVE
    HEMET, CA 92545
Effective as of 01-JUL-19

FELIX, FRANCISCO, PA
Provider ID: N/A
☞ 1011 E DEVONSHIRE AVE
    HEMET, CA 92543
Effective as of 01-AUG-23

FELIX, FRANCISCO, PA
Provider ID: N/A
☞ 1011 E DEVONSHIRE AVE
    HEMET, CA 92543
Effective as of 01-AUG-23

GONZALEZ, KEVIN, PA
Provider ID: N/A
☞ 3989 W STETSON AVE STE 201
    HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA
Provider ID: N/A
☞ 3989 W STETSON AVE STE 201
    HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA
Provider ID: N/A
☞ 3989 W STETSON AVE STE 201
    HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA
Provider ID: N/A
☞ 3989 W STETSON AVE STE 201
    HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA
Provider ID: N/A
☞ 3989 W STETSON AVE STE 201
    HEMET, CA 92545
Effective as of 01-DEC-23

GONZALEZ, KEVIN, PA
Provider ID: N/A
☞ 3989 W STETSON AVE STE 201
    HEMET, CA 92545
Effective as of 01-DEC-23

HUNSAKER, NALANI, PA†
Provider ID: N/A
☞ 1515 W FLORIDA AVE
    HEMET, CA 92543
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†
Provider ID: N/A
☞ 1515 W FLORIDA AVE
    HEMET, CA 92543
Effective as of 01-DEC-20

HUNSAKER, NALANI, PA†
Provider ID: N/A
☞ 1515 W FLORIDA AVE
    HEMET, CA 92543
Effective as of 01-DEC-20

LANIER, JAME, PA†
Provider ID: N/A
☞ 1264 E LATHAM AVE
    HEMET, CA 92543
Effective as of 01-OCT-19

LANIER, JAME, PA†
Provider ID: N/A
☞ 1264 E LATHAM AVE
    HEMET, CA 92543
Effective as of 01-JUL-17

MACHO, DANIELLA, PA†
Provider ID: N/A
☞ 1701 E FLORIDA AVE
    HEMET, CA 92544
Effective as of 01-FEB-17

MITCHELL, PAUL, PA
Provider ID: N/A
☞ 422 N SAN JACINTO ST STE B
    HEMET, CA 92543
Effective as of 01-JUN-18

MITCHELL, PAUL, PA
Provider ID: N/A
☞ 1011 E DEVONSHIRE AVE
    HEMET, CA 92543
Effective as of 01-FEB-24

MOORE, PAMELA, PA†

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
3889 W STETSON AVE STE 120
HEMET, CA 92545
Effective as of 01-DEC-17

QUEROL, CYRUS, PA
Provider ID: N/A
901 S STATE ST STE 100
HEMET, CA 92543
Effective as of 01-APR-24

RODDICK, JASON, PA
Provider ID: N/A
3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

RODDICK, JASON, PA†
Provider ID: N/A
3853 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-JUL-23

RODDICK, JASON, PA
Provider ID: N/A
3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-MAY-18

RODDICK, JASON, PA
Provider ID: N/A
3989 W STETSON AVE STE 201
HEMET, CA 92545
Effective as of 01-DEC-23

SHORES, CLORINDA, PA†
Provider ID: N/A
255 N GILBERT ST BLDG B4
HEMET, CA 92543
Effective as of 01-DEC-23

SMITH, ANTHONY, PA†
Provider ID: N/A
3889 W STETSON AVE STE 200
HEMET, CA 92545
Effective as of 01-OCT-17

SMITH, ANTHONY, PA†
Provider ID: N/A
3889 W STETSON AVE STE 200
HEMET, CA 92545
Effective as of 01-JUN-18

SZCZESIK, KRYSTIAN, PA†
Provider ID: N/A
3889 W STETSON AVE STE 200
HEMET, CA 92545
Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAY-18

SZCZESIK, KRYSTIAN, PA†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-SEP-17

PSYCHIATRY

ADEYEMO, OLUWAFEMI, MD
Provider ID: N/A
361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-SEP-17

ADEYEMO, OLUWAFEMI, MD
Provider ID: N/A
361 N SAN JACINTO ST
HEMET, CA 92543
Effective as of 01-MAR-15
### C1. Network Provider List

#### PMH Physician

Provider ID: N/A  
361 N SAN JACINTO ST  
HEMET, CA 92543  
Effective as of 01-JUN-17

**ADEYEMO, OLUWAFEMI, MD**  
Provider ID: N/A  
361 N SAN JACINTO ST  
HEMET, CA 92543  
Effective as of 01-MAR-15

**ADEYEMO, OLUWAFEMI, MD**  
Provider ID: N/A  
361 N SAN JACINTO ST  
HEMET, CA 92543  
Effective as of 01-JUN-17

**ADEYEMO, OLUWAFEMI, MD**  
Provider ID: N/A  
361 N SAN JACINTO ST  
HEMET, CA 92543  
Effective as of 01-JUN-17

**JAKKULA, JAGAN, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-AUG-22

**JAKKULA, JAGAN, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-OCT-20

**JAKKULA, JAGAN, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-OCT-20

**JAKKULA, JAGAN, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**JAKKULA, JAGAN, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**JAKKULA, JAGAN, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**JAKKULA, JAGAN, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**JAKKULA, JAGAN, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**JAKKULA, JAGAN, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**KUNAM, SYAM, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-AUG-22

**KUNAM, SYAM, MD**  
Provider ID: N/A  
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HEMET, CA 92543  
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Effective as of 01-AUG-22

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Effective as of 01-AUG-22

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Effective as of 01-AUG-22

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Effective as of 01-AUG-22

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HEMET, CA 92543  
Effective as of 01-AUG-22

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Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-AUG-22

**KUNAM, SYAM, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-AUG-22

**KUNAM, SYAM, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-AUG-22

**PERSAUD, PRIA, MD**  
Provider ID: N/A  
903 E DEVONSHIRE AVE  
STE D  
HEMET, CA 92543  
Effective as of 01-AUG-20

**PUCHAKAYALA, NANDITA, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**PUCHAKAYALA, NANDITA, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**PUCHAKAYALA, NANDITA, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**PUCHAKAYALA, NANDITA, MD**  
Provider ID: N/A  
162 N SANTA FE ST  
HEMET, CA 92543  
Effective as of 01-SEP-23

**PSYCHOLOGIST**

**DUNN, JOSEPH, PhD**  
Provider ID: N/A  
1011 E DEVONSHIRE AVE  
STE 203  
HEMET, CA 92543  
Effective as of 01-JUN-23
### C1. 網絡內提供者清單
専科護理醫師

<table>
<thead>
<tr>
<th>医生名称</th>
<th>职称</th>
<th>机构地址</th>
<th>有效日期</th>
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<tr>
<td>DUNN, JOSEPH, PhD</td>
<td>Provider ID: N/A</td>
<td>1011 E DEVONSHIRE AVE STE 203 HEMET, CA 92543</td>
<td>Effective as of 01-JUN-23</td>
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<tr>
<td>DUNN, JOSEPH, PhD</td>
<td>Provider ID: N/A</td>
<td>1000 E LATHAM AVE HEMET, CA 92543</td>
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<td>Provider ID: N/A</td>
<td>1000 E LATHAM AVE HEMET, CA 92543</td>
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<td>Provider ID: N/A</td>
<td>1000 E LATHAM AVE HEMET, CA 92543</td>
<td>Effective as of 01-SEP-09</td>
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### PULMONARY DISEASES

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<th>医生名称</th>
<th>职称</th>
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<th>有效日期</th>
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<tr>
<td>DHANANI, YURZUL, MD</td>
<td>Provider ID: N/A</td>
<td>1275 E LATHAM AVE STE C HEMET, CA 92543</td>
<td>Effective as of 01-MAR-14</td>
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<td>DHANANI, YURZUL, MD</td>
<td>Provider ID: N/A</td>
<td>1275 E LATHAM AVE STE C HEMET, CA 92543</td>
<td>Effective as of 01-JUL-23</td>
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<tr>
<td>DHANANI, YURZUL, MD</td>
<td>Provider ID: N/A</td>
<td>1275 E LATHAM AVE STE C HEMET, CA 92543</td>
<td>Effective as of 01-SEP-09</td>
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<td>DHANANI, YURZUL, MD</td>
<td>Provider ID: N/A</td>
<td>1275 E LATHAM AVE STE C HEMET, CA 92543</td>
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### RADIATION ONCOLOGY

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<tr>
<th>医生名称</th>
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<tr>
<td>BELL, DAVID, MD</td>
<td>Provider ID: N/A</td>
<td>430 W STETSON AVE HEMET, CA 92543</td>
<td>Effective as of 01-OCT-21</td>
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<tr>
<td>BELL, DAVID, MD</td>
<td>Provider ID: N/A</td>
<td>430 W STETSON AVE HEMET, CA 92543</td>
<td>Effective as of 01-DEC-21</td>
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### RADIOLOGY DIAGNOSTIC

<table>
<thead>
<tr>
<th>医生名称</th>
<th>职称</th>
<th>机构地址</th>
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<tr>
<td>BURROUGHS, GLORIA, MD</td>
<td>Provider ID: N/A</td>
<td>850 E LATHAM AVE STE 101 HEMET, CA 92543</td>
<td>Effective as of 01-OCT-17</td>
</tr>
<tr>
<td>BURROUGHS, GLORIA, MD</td>
<td>Provider ID: N/A</td>
<td>850 E LATHAM AVE STE 101 HEMET, CA 92543</td>
<td>Effective as of 01-OCT-17</td>
</tr>
<tr>
<td>BURROUGHS, GLORIA, MD</td>
<td>Provider ID: N/A</td>
<td>850 E LATHAM AVE STE 101 HEMET, CA 92543</td>
<td>Effective as of 01-OCT-17</td>
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### RHEUMATOLOGY

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<th>医生名称</th>
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<th>机构地址</th>
<th>有效日期</th>
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<tr>
<td>COLBURN, KEITH, MD</td>
<td>Provider ID: N/A</td>
<td>949 CALHOUN PL STE F HEMET, CA 92543</td>
<td>Effective as of 01-MAR-21</td>
</tr>
<tr>
<td>MEHTA, AMAL, MD</td>
<td>Provider ID: N/A</td>
<td>949 CALHOUN PL STE F HEMET, CA 92543</td>
<td>Effective as of 01-SEP-18</td>
</tr>
<tr>
<td>MEHTA, AMAL, MD</td>
<td>Provider ID: N/A</td>
<td>949 CALHOUN PL STE F HEMET, CA 92543</td>
<td>Effective as of 01-JUL-23</td>
</tr>
<tr>
<td>RAMASWAMY, DHARMARAJAN, MD</td>
<td>Provider ID: N/A</td>
<td>540 N JACINTO ST HEMET, CA 92543</td>
<td>Effective as of 01-MAR-07</td>
</tr>
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<thead>
<tr>
<th>医生名称</th>
<th>职称</th>
<th>机构地址</th>
<th>有效日期</th>
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<tbody>
<tr>
<td>MONTERO, MARIA, PT</td>
<td>Provider ID: N/A</td>
<td>1515 W FLORIDA AVE STE E HEMET, CA 92543</td>
<td>Effective as of 01-SEP-18</td>
</tr>
<tr>
<td>MONTERO, MARIA, PT</td>
<td>Provider ID: N/A</td>
<td>1515 W FLORIDA AVE STE E HEMET, CA 92543</td>
<td>Effective as of 01-SEP-18</td>
</tr>
<tr>
<td>SMART, DIANNE, PT</td>
<td>Provider ID: N/A</td>
<td>1515 W FLORIDA AVE STE E HEMET, CA 92543</td>
<td>Effective as of 01-SEP-18</td>
</tr>
</tbody>
</table>

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

RAMASWAMY, DHARMARAJAN, MD†
Provider ID: N/A
949 CALHOUN PL STE F
HEMET, CA 92543
Effective as of 01-JUL-23

GORSKI, TITO, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, TITO, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-DEC-20

GORSKI, TITO, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-DEC-21

GORSKI, TITO, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-APR-22

BARRERA, KAYLENE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-APR-22

BARRERA, KAYLENE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

BARRERA, KAYLENE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
IGWE, DANIEL, MD
Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-18

IGWE, DANIEL, MD
Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-18

JOHNSON, HEGE, MD
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

JOHNSON, HEGE, MD
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

JOHNSON, HEGE, MD
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

MAC, OLIVIA, MD
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-09

TIU, BRIAN, MD
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-22

WANG, XIUJIE, MD
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-SEP-19

SURGERY GENERAL VASCULAR

GORSKI, YARA, MD
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

GORSKI, YARA, MD
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

KARMUR, AMIT, DO
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-JAN-22

NAFIU, BOLAJI, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

TIU, BRIAN, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-MAY-22

WANG, XIUJIE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†
Provider ID: N/A
3853 W STETSON AVE STE 105
HEMET, CA 92545
Effective as of 01-OCT-20

WANG, XIUJIE, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-CIR-15

ALLEN, JONATHAN, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-20

ALLEN, JONATHAN, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Teleservice
Effective as of 01-CIR-15

ALLEN, JONATHAN, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Teleservice
Effective as of 01-JUL-15

ALLEN, JONATHAN, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Teleservice
Effective as of 01-DEC-21

BURTON, PAUL, DO†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-15

BURTON, PAUL, DO†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-DEC-21

BURTON, PAUL, DO†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-15

CAPUTO, ROY, MD
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-APR-24
C1. 網絡內提供者清單

專科護理醫師

CHAN, JASON, MD
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-APR-24

ELSISSY, PETER, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-21

ELSISSY, PETER, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAY-16

ELSISSY, PETER, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-21

GHAZAL, RONNY, MD
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-21

GRAMES, BARRY, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

GRAMES, BARRY, MD†
Provider ID: N/A
3889 W STETSON AVE STE 200
HEMET, CA 92545
Effective as of 01-AUG-21

GRAMES, BARRY, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAY-16

GUSTAFSON, GEORGE, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-AUG-15

HUSAIN, ASGHAR, MD
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

LE, SANG, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-NOV-16

LE, SANG, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JUL-15

LE, SANG, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

MATIKO, JAMES, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

PANSE, MILIND, MD†
Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-JUL-23

PATTON, DANIEL, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-JAN-20

PATTON, DANIEL, MD†
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-MAR-24

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

PATTON, DANIEL, MD
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-APR-24

POWERS, BRET, DO
Provider ID: N/A
3889 W STETSON AVE STE 100
HEMET, CA 92545
Effective as of 01-APR-24

WONG, ANDREW, MD
Provider ID: N/A
1011 E DEVONSHIRE AVE STE 203
HEMET, CA 92543
Effective as of 01-NOV-09

UROLOGY
NIHIRA, MIKIO, MD
Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

NIHIRA, MIKIO, MD
Provider ID: N/A
1225 E LATHAM AVE STE A
HEMET, CA 92543
Effective as of 01-OCT-21

FAMILY PRACTICE
CHISUM, FAITH, MD
Provider ID: N/A
949 PALM AVE

INTERNAL MEDICINE
RYAN, DANA, MD
Provider ID: N/A
949 PALM AVE
IMPERIAL BEACH, CA 91932
Effective as of 01-APR-23

REGISTERED PHYSICAL THERAPIST
CHENG, BRANDON, PT
Provider ID: N/A
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-FEB-23

VILLANUEVA, GIOVANNI, PT
Provider ID: N/A
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Effective as of 01-JAN-21

ALLERGY IMMUNOLOGY
CARR, WARNER, MD
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD
Provider ID: N/A
22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23

FRIEDMAN, BRUCE, MD
Provider ID: N/A
22 ODYSSEY STE 240
IRVINE, CA 92618
Effective as of 01-JUL-23
### Network Provider List

**FRIEDMAN, BRUCE, MD†**
Provider ID: N/A
- 22 ODYSSEY STE 240
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**FRIEDMAN, BRUCE, MD†**
Provider ID: N/A
- 22 ODYSSEY STE 240
  IRVINE, CA 92618
  Effective as of 01-DEC-21

**FRIEDMAN, BRUCE, MD†**
Provider ID: N/A
- 22 ODYSSEY STE 240
  IRVINE, CA 92618
  Effective as of 01-DEC-21

**FRIEDMAN, BRUCE, MD†**
Provider ID: N/A
- 22 ODYSSEY STE 240
  IRVINE, CA 92618
  Effective as of 01-DEC-21

**FRIEDMAN, BRUCE, MD†**
Provider ID: N/A
- 22 ODYSSEY STE 240
  IRVINE, CA 92618
  Effective as of 01-DEC-21

**LEE-KIM, CHRISTINE, DO**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**LEE-KIM, CHRISTINE, DO**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-DEC-21

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-DEC-21

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-DEC-21

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-DEC-21

**VENKAT, GEETA, MD†**
Provider ID: N/A
- 18 ENDEAVOR STE 208
  IRVINE, CA 92618
  Effective as of 01-OCT-17

**VENKAT, GEETA, MD†**
Provider ID: N/A
- 18 ENDEAVOR STE 208
  IRVINE, CA 92618
  Effective as of 01-OCT-17

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
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**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
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**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
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**MEHTA, VINAY, MD**
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- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
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**MEHTA, VINAY, MD**
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- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
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**MEHTA, VINAY, MD**
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- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23

**MEHTA, VINAY, MD**
Provider ID: N/A
- 15785 LAGUNA CANYON RD STE 100
  IRVINE, CA 92618
  Effective as of 01-MAY-23
C1. 網絡內提供者清單

專科護理醫師

**HO, LARRY, MD**
Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-OCT-01

**PERERA-THANGARATNAM, D, MD**
Provider ID: N/A

5 HOLLAND STE 101
IRVINE, CA 92618
Effective as of 01-SEP-19

**ANESTHESIOLOGY PAIN MANAGEMENT**

**BESHAI, ALFRED, MD**
Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618
Effective as of 01-DEC-23

**BESHAI, ALFRED, MD**
Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618
Effective as of 01-JUN-22

**BESHAI, ALFRED, MD**
Provider ID: N/A

16405 SAND CANYON AVE
STE 210
IRVINE, CA 92618
Effective as of 01-MAR-24

**HO, LARRY, MD**
Provider ID: N/A

15701 ROCKFIELD BLVD
IRVINE, CA 92618
Effective as of 01-APR-11

**AUDIOLOGIST**

**NIAVARANY, PIRAYEH, AuD**
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-22

**PANEK, KRISTI, AuD**
Provider ID: N/A

18 ENDEAVOR STE 208
IRVINE, CA 92618
Effective as of 01-NOV-22

**CARDIAC ELECTROPHYSIOLOGY**

**BURRIS, RYAN, MD**
Provider ID: N/A

16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-NOV-22

**RAFIZAD, AMIR, MD**
Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618
Effective as of 01-JAN-15

**Rafizad, Amir, MD**
Provider ID: N/A

113 WATERWORKS WAY
STE 345
IRVINE, CA 92618
Effective as of 01-JAN-15

Your PCP's physician group may have its own network内的精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得 Blue Shield 的事先授权，然后该服务才能获得承保。

如欲线上获取精神健康服务提供者清单，请造访 blueshieldca.com/fad。
<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Address</th>
<th>City, State</th>
<th>Effective As Of</th>
</tr>
</thead>
<tbody>
<tr>
<td>MITIKU, TEFERI, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 255</td>
<td>IRVINE, CA 92618</td>
<td>01-FEB-22</td>
</tr>
<tr>
<td>DOAN VAN, NICOLAS, MD†</td>
<td>N/A</td>
<td>16300 SAND CANYON AVE STE 708</td>
<td>IRVINE, CA 92618</td>
<td>01-OCT-23</td>
</tr>
<tr>
<td>COHEN, STEPHEN, MD†</td>
<td>N/A</td>
<td>16300 SAND CANYON AVE STE 201</td>
<td>IRVINE, CA 92618</td>
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<tr>
<td>WARRIER, NIKHIL, MD†</td>
<td>N/A</td>
<td>16300 SAND CANYON AVE STE 201</td>
<td>IRVINE, CA 92618</td>
<td>01-OCT-23</td>
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<td>ASHTIANI, ALI, MD</td>
<td>N/A</td>
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<td>01-OCT-23</td>
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<td>01-OCT-23</td>
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<td>ASHTIANI, ALI, MD</td>
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<td>01-OCT-23</td>
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<td>16300 SAND CANYON AVE STE 201</td>
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<td>01-APR-18</td>
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<tr>
<td>ESLAMI, BAHRAM, MD†</td>
<td>N/A</td>
<td>16300 SAND CANYON AVE STE 201</td>
<td>IRVINE, CA 92618</td>
<td>01-APR-18</td>
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<tr>
<td>ESLAMI, BAHRAM, MD†</td>
<td>N/A</td>
<td>16300 SAND CANYON AVE STE 201</td>
<td>IRVINE, CA 92618</td>
<td>01-APR-18</td>
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</table>
C1. 網絡內提供者清單
專科護理醫師

ESLAMI, BAHRAM, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

ESLAMI, BAHRAM, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

ESLAMI-FARSANI, MAHMOUD, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

ESLAMI-FARSANI, MAHMOUD, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

MELTZER, PAUL, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

MELTZER, PAUL, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

MELTZER, PAUL, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 201
IRVINE, CA 92618
Effective as of 01-JAN-22

NGUYEN, HOANG, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-DEC-21

NGUYEN, HUY, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 255
IRVINE, CA 92618
Effective as of 01-JAN-20

NI, YU-MING, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23

PATEL, SANJIV, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23

PATEL, SANJIV, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-JAN-22

WARRIER, NIKHIL, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 708
IRVINE, CA 92618
Effective as of 01-DEC-21
C1. 網絡內提供者清單

専科護理醫師

WERTMAN, BRETT, MD
Provider ID: N/A
16305 SAND CANYON AVE STE 255
IRVINE, CA 92618
Effective as of 01-JAN-20

WONG, JENNIFER, MD
Provider ID: N/A
16300 SAND CANYON AVE STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23

WONG, JENNIFER, MD
Provider ID: N/A
16300 SAND CANYON AVE STE 708
IRVINE, CA 92618
Effective as of 01-JAN-22

YALVAC, ETHAN, MD
Provider ID: N/A
16300 SAND CANYON AVE STE 201
IRVINE, CA 92618
Effective as of 01-OCT-23

YALVAC, ETHAN, MD
Provider ID: N/A
16300 SAND CANYON AVE STE 201
IRVINE, CA 92618
Effective as of 01-MAY-22

YANG, TAE, MD
Provider ID: N/A
16300 SAND CANYON AVE STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23

YANG, TAE, MD
Provider ID: N/A
16300 SAND CANYON AVE STE 708
IRVINE, CA 92618
Effective as of 01-OCT-23

CERTIFIED
ACUPUNCTURIST

CHOI, JI, LAC
Provider ID: N/A
15785 LAGUNA CANYON RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-22

CHOI, JI, LAC
Provider ID: N/A
15785 LAGUNA CANYON RD STE 330
IRVINE, CA 92618
Effective as of 01-OCT-22

HONG, HEE KYUNG, LAC
Provider ID: N/A
113 WATERWORKS WAY STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

KIM, LAUREN SOOJIN, LAC
Provider ID: N/A
113 WATERWORKS WAY STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

KIM, CHEL, LAC
Provider ID: N/A
113 WATERWORKS WAY STE 205
IRVINE, CA 92618
Effective as of 01-MAY-21

HONG, HEE KYUNG, LAC
Provider ID: N/A
113 WATERWORKS WAY STE 205
IRVINE, CA 92618
Effective as of 01-AUG-22

KIM, LAUREN SOOJIN, LAC
Provider ID: N/A
113 WATERWORKS WAY STE 205
IRVINE, CA 92618
Effective as of 01-AUG-22

HONG, HEE KYUNG, LAC
Provider ID: N/A
113 WATERWORKS WAY STE 205
IRVINE, CA 92618
Effective as of 01-OCT-22

KIM, LAUREN SOOJIN, LAC
Provider ID: N/A
113 WATERWORKS WAY STE 205
IRVINE, CA 92618
Effective as of 01-OCT-22

KIM, CHEL, LAC
Provider ID: N/A
113 WATERWORKS WAY STE 205
IRVINE, CA 92618
Effective as of 01-OCT-22

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

Effective as of 01-MAY-21

LEE, BRIAN, LAC†
Provider ID: N/A
15785 LAGUNA CANYON RD STE 330
IRVINE, CA 92618
Effective as of 01-MAY-21

LEE, BRIAN, LAC†
Provider ID: N/A
15785 LAGUNA CANYON RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, BRIAN, LAC†
Provider ID: N/A
15785 LAGUNA CANYON RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC
Provider ID: N/A
15785 LAGUNA CANYON RD STE 330
IRVINE, CA 92618
Effective as of 01-JUL-23

LEE, SEMI, LAC
Provider ID: N/A
15785 LAGUNA CANYON RD STE 330
IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, SEMI, LAC
Provider ID: N/A
15785 LAGUNA CANYON RD STE 330
IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, BRIAN, LAC†
Provider ID: N/A
15785 LAGUNA CANYON RD STE 330
IRVINE, CA 92618
Effective as of 01-SEP-21

CERTIFIED NURSE PRACTITIONER

CARR, CHERYL, NP
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-APR-23

CARR, CHERYL, NP
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-APR-23

CARR, CHERYL, NP
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-APR-23

CARR, CHERYL, NP
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-APR-23

CARR, CHERYL, NP
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-APR-23

CARR, CHERYL, NP
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

CARR, CHERYL, NP
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

CARR, CHERYL, NP
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

CARR, CHERYL, NP
Provider ID: N/A
15785 LAGUNA CANYON RD STE 100
IRVINE, CA 92618
Effective as of 01-MAY-23

PARSI KANEMOTO, MARYAM, LAC†
Provider ID: N/A
22 ODYSSEY STE 165

CHOI, RANA, NP†
Provider ID: N/A
15775 LAGUNA CANYON RD STE 210

239
**C1. 網絡內提供者清單**

**專科護理醫師**

<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Address</th>
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<tbody>
<tr>
<td>DESAI, SONAM, NPF</td>
<td>N/A</td>
<td>16300 SAND CANYON AVE STE 311</td>
<td>01-SEP-19</td>
</tr>
<tr>
<td>FERRANTE, JADE, NP</td>
<td>N/A</td>
<td>8607 IRVINE CENTER DR</td>
<td>01-OCT-22</td>
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<tr>
<td>LIU, GRACE, NP</td>
<td>N/A</td>
<td>113 WATERWORKS WAY STE 155</td>
<td>01-NOV-23</td>
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<tr>
<td>LIU, GRACE, NP</td>
<td>N/A</td>
<td>113 WATERWORKS WAY STE 155</td>
<td>01-MAY-23</td>
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<tr>
<td>MANALESE, MARIA THERESA, NPF</td>
<td>N/A</td>
<td>16100 SAND CANYON AVE STE 240</td>
<td>01-APR-23</td>
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<tr>
<td>PARK, SE, NP</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 200</td>
<td>01-JUL-23</td>
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<tr>
<td>PARK, SE, NP</td>
<td>N/A</td>
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<td>01-OCT-22</td>
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<td>SHIRKHANI, PARISA, NPF</td>
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<tr>
<td>WU, JENNY, NP</td>
<td>N/A</td>
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<td>01-DEC-23</td>
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<tr>
<td>WEDDLE, DIRK, DC</td>
<td>N/A</td>
<td>15375 BARRANCA PKWY</td>
<td>01-JAN-23</td>
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**CHIROPRACTOR**

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<tr>
<td>KANG, KYUNG, DC</td>
<td>N/A</td>
<td>14875 JEFFREY RD STE 210</td>
<td>01-JUL-23</td>
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<tr>
<td>KIM, SEON-HOON SEAN, DC</td>
<td>N/A</td>
<td>113 WATERWORKS WAY STE 205</td>
<td>01-MAR-22</td>
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<tr>
<td>KIM, SEON-HOON SEAN, DC</td>
<td>N/A</td>
<td>113 WATERWORKS WAY STE 205</td>
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<td>N/A</td>
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<td>KIM, SEON-HOON SEAN, DC</td>
<td>N/A</td>
<td>113 WATERWORKS WAY STE 205</td>
<td>01-OCT-23</td>
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**CERTIFIED REGISTERED NURSE MIDWIFE**

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<td>SAJADI, ALISA, CRNM</td>
<td>N/A</td>
<td>15375 BARRANCA PKWY</td>
<td>01-JAN-23</td>
</tr>
</tbody>
</table>
C1. 網絡內提供者清單

专科護理醫師

**Clinical Neuropsychologist**

**Bennett, Lauren, PhD**
Provider ID: N/A
16405 Sand Canyon Ave
Ste 220
Irvine, CA 92618
Effective as of 01-Oct-22

**Wang, Steven, MD**
Provider ID: N/A
16105 Sand Canyon Ave
Ste 230
Irvine, CA 92618
Effective as of 01-Jul-22

**Emergency Medicine**

**Kadakia, Amar, MD**
Provider ID: N/A
11 Technology Dr
Irvine, CA 92618
Effective as of 01-Jan-18

**Karimi, Kambiz, MD**
Provider ID: N/A
11 Technology Dr
Irvine, CA 92618
Effective as of 01-Jan-18

**Endocrinology/ Metabolism/ Diabetes**

**Chavez, Brian, MD**
Provider ID: N/A
22 Odyssey Ste 115
Irvine, CA 92618
Teleservice
Effective as of 01-Oct-23

**Dermatology**

**Bagheri, Bita, MD**
Provider ID: N/A
16305 Sand Canyon Ave
Ste 220
Irvine, CA 92618
Effective as of 01-Jan-21

**Wang, Steven, MD**
Provider ID: N/A
16105 Sand Canyon Ave
Ste 230
Irvine, CA 92618
Effective as of 01-Jul-22

**Farjoudi, Farhad, MD**
Provider ID: N/A
113 Waterworks Way
Ste 108
Irvine, CA 92618
Effective as of 01-May-22

**Farjoudi, Farhad, MD**
Provider ID: N/A
113 Waterworks Way
Ste 250
Irvine, CA 92618
Effective as of 01-Jun-22

**Hosseini, Alireza, MD**
Provider ID: N/A
16305 Sand Canyon Ave
Ste 220
Irvine, CA 92618
Effective as of 01-Mar-22

**Hosseini, Alireza, MD**
Provider ID: N/A
16305 Sand Canyon Ave
Ste 220
Irvine, CA 92618
Effective as of 01-Mar-22

Your PCP’s doctor group may have its own network mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, certain services may require mental health service providers to obtain Blue Shield authorization before the service can be covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Address</th>
<th>City, CA</th>
<th>Zip Code</th>
<th>Effective As Of</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOSSEINI, ALIREZA, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 220</td>
<td>IRVINE</td>
<td>92618</td>
<td>01-MAR-22</td>
</tr>
<tr>
<td>HOSSEINI, ALIREZA, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 220</td>
<td>IRVINE</td>
<td>92618</td>
<td>01-MAR-22</td>
</tr>
<tr>
<td>HOSSEINI, ALIREZA, MD†</td>
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Your PCP’s network may have its own network of mental health providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require mental health provider authorization before being covered.

To access the mental health provider list online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單
專科護理醫師

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<td>N/A</td>
<td>500 SUPERIOR AVE STE 100</td>
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<td>KAUFMAN, DAVID, DO</td>
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<td>18 ENDEAVOR STE 204</td>
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<td>KUMAR, RASHMI, MD</td>
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<td>16405 SAND CANYON AVE STE 280</td>
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<tr>
<td>LEE, PAUL, MD</td>
<td>N/A</td>
<td>16105 SAND CANYON AVE STE 230</td>
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C1. 網絡內提供者清單
 專科護理醫師

Effective as of 01-OCT-23

LEE, JAMES, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JUN-23

LEE, PAUL, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-23

LEE, PAUL, MD²
Provider ID: N/A
113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-MAY-16

LEE, PAUL, MD²
Provider ID: N/A
113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21

LEE, PAUL, MD²
Provider ID: N/A
113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-JAN-20

LEE, PAUL, MD²
Provider ID: N/A
113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-AUG-18

OMAN, MATTHEW, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

OMAN, MATTHEW, MD²
Provider ID: N/A
113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23

OHARA, JUN ICHI, MD
Provider ID: N/A
22 ODYSSEY STE 170A
IRVINE, CA 92618
Effective as of 01-JAN-18

OMAN, MATTHEW, MD²
Provider ID: N/A
113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-AUG-18

OMAN, MATTHEW, MD²
Provider ID: N/A
113 WATERWORKS WAY
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OMAN, MATTHEW, MD²
Provider ID: N/A
113 WATERWORKS WAY
STE 155
IRVINE, CA 92618
Effective as of 01-OCT-23
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**GYNECOLOGIC ONCOLOGY**

| Provider ID: N/A | 16105 SAND CANYON AVE STE 260 | IRVINE, CA 92618 | Effective as of 01-NOV-18 |

| Provider ID: N/A | 113 WATERWORKS WAY STE 155 | IRVINE, CA 92618 | Effective as of 01-OCT-18 |

**OMAN, MATTHEW, MD†**

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**OMAN, MATTHEW, MD†**

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**YU, VICTOR, MD†**

| Provider ID: N/A | 113 WATERWORKS WAY STE 155 | IRVINE, CA 92618 | Effective as of 01-OCT-20 |

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**246**
C1. 網絡內提供者清單

網絡內提供者清單

BECK, TIFFANY, MD†
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

BECK, TIFFANY, MD†
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

LEVINE, MONICA, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

LEVINE, MONICA, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

MENDIVIL, ALBERTO, MD†
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

MENDIVIL, ALBERTO, MD†
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

HEMATOLOGY / ONCOLOGY

GOLDENSON, BENJAMIN, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

NANGIA, CHAITALI, MD†
Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-FEB-23

NANGIA, CHAITALI, MD†
Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-22

PANDIT, LALITA, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-OCT-21

SEERY, TARA, MD†
Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

SEERY, TARA, MD†
Provider ID: N/A
16105 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-JAN-21

HEPATOLOGY

FONG, TSE LING, MD
Provider ID: N/A
16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-23

FONG, TSE LING, MD
Provider ID: N/A
16405 SAND CANYON AVE
STE 230
IRVINE, CA 92618
Effective as of 01-OCT-22

INFECTIOUS DISEASE

SARAFIAN, FARJAD, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-AUG-22

SARAFIAN, FARJAD, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

SARAFIAN, FARJAD, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-22

SARAFIAN, FARJAD, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-23

SARAFIAN, FARJAD, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 260
IRVINE, CA 92618
Effective as of 01-OCT-22
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<td>AHDOOT, JACOB, MD²</td>
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<td>APPEL, RICHARD, MD‡</td>
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<td>BILLECI, BARTON, MD‡</td>
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C1. 網絡內提供者清單

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您的 PCP 的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得 Blue Shield 的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访 blueshieldca.com/fad。
C1. 網絡內提供者清單

**专科護理醫師**

Provider ID: N/A
16300 SAND CANYON AVE STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

**KAZEMI, SEPIDEH, MD**
Provider ID: N/A
16300 SAND CANYON AVE STE 601
IRVINE, CA 92618
Effective as of 01-JAN-21

**NGUYEN, HUY, MD**
Provider ID: N/A
16305 SAND CANYON AVE STE 255
IRVINE, CA 92618
Effective as of 01-SEP-17

**NGUYEN, HUY, MD**
Provider ID: N/A
16305 SAND CANYON AVE STE 255
IRVINE, CA 92618
Effective as of 01-SEP-17

**SCHACHTER, JESSICA, DO**
Provider ID: N/A
16300 SAND CANYON AVE STE 708
IRVINE, CA 92618
Effective as of 01-NOV-23

**YALVAC, ETHAN, MD**
Provider ID: N/A
16300 SAND CANYON AVE STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

**YALVAC, ETHAN, MD**
Provider ID: N/A
16300 SAND CANYON AVE STE 201
IRVINE, CA 92618
Effective as of 01-JAN-21

**YALVAC, ETHAN, MD**
Provider ID: N/A
16300 SAND CANYON AVE STE 201
IRVINE, CA 92618
Effective as of 01-APR-18

**LICENSED CLINICAL SOCIAL WORKER**

**BOODMAN, SANDRA, LCSW**
Provider ID: N/A
15635 ALTON PKWY STE 350
IRVINE, CA 92618
Effective as of 01-DEC-23

**HUMPHRIES, CORINNE, LCSW**
Provider ID: N/A
15635 ALTON PKWY STE 350
IRVINE, CA 92618
Effective as of 01-DEC-23

**HUMPHRIES, CORINNE, LCSW**
Provider ID: N/A
15635 ALTON PKWY STE 350
IRVINE, CA 92618
Effective as of 01-DEC-23
C1. 網絡內提供者清單

MARRIAGE FAMILY THERAPIST

LIU, CHIA CHI, MFT
Provider ID: N/A
📍 15635 ALTON PKWY STE 350
IRVINE, CA 92618
Effective as of 01-JUL-23

LIU, CHIA CHI, MFT
Provider ID: N/A
📍 15635 ALTON PKWY STE 350
IRVINE, CA 92618
Effective as of 01-JUL-23

MAJDALANI, KAREN, MFT
Provider ID: N/A
📍 60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

MAJDALANI, KAREN, MFT
Provider ID: N/A
📍 60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

MCINTYRE, SUSAN, MFT
Provider ID: N/A
📍 15635 ALTON PKWY STE 350
IRVINE, CA 92618
Effective as of 01-DEC-23

MCINTYRE, SUSAN, MFT
Provider ID: N/A
📍 15635 ALTON PKWY STE 350
IRVINE, CA 92618
Effective as of 01-DEC-23

ONEILL, SEAN, MFT
Provider ID: N/A
📍 60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

ONEILL, SEAN, MFT
Provider ID: N/A
📍 60 STEPPING STONE
IRVINE, CA 92603
Effective as of 01-JUN-23

SHAH, SALMA, MFT
Provider ID: N/A
📍 15635 ALTON PKWY STE 350
IRVINE, CA 92618
Effective as of 01-DEC-23

SHAH, SALMA, MFT
Provider ID: N/A
📍 15635 ALTON PKWY STE 350
IRVINE, CA 92618
Effective as of 01-DEC-23

MATERNAL AND FETAL MEDICINE

BUSH, MELISSA, MD†
Provider ID: N/A
📍 15785 LAGUNA CANYON RD STE 360
IRVINE, CA 92618
Effective as of 01-FEB-21

BUSH, MELISSA, MD†
Provider ID: N/A
📍 15785 LAGUNA CANYON RD STE 360
IRVINE, CA 92618
Effective as of 01-FEB-23

DAY, ROBERT, MD†
Provider ID: N/A
📍 15785 LAGUNA CANYON RD STE 360
IRVINE, CA 92618
Effective as of 01-JAN-23
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<td>N/A</td>
<td>15785 LAGUNA CANYON RD STE 360</td>
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<td>MASAKI, DAMON, MD†</td>
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<td>SHRIVASTAVA, VINEET, MD</td>
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<td>01-MAR-23</td>
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<td>16105 SAND CANYON AVE STE 230</td>
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<td>01-MAR-23</td>
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<tr>
<td>PANDIT, LALITA, MD†</td>
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<td>IRVINE, CA 92618</td>
<td>01-JAN-21</td>
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<td>AHDOOT, JACOB, MD†</td>
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<td>AHDOOT, JACOB, MD†</td>
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<td>N/A</td>
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<td>01-AUG-23</td>
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C1. 網絡內提供者清單

MANSOURY, HADI, MD†
Provider ID: N/A
11 TECHNOLOGY DR
IRVINE, CA 92618
Effective as of 01-JAN-18

MESBAH, AZITA, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAY-23

SAWHNEY, SAJEET, MD†
Provider ID: N/A
15825 LAGUNA CANYON RD STE 202
IRVINE, CA 92618
Effective as of 01-OCT-20

YANG, PHILIP, MD†
Provider ID: N/A
15825 LAGUNA CANYON RD STE 202
IRVINE, CA 92618
Effective as of 01-MAY-23

NEUROLOGY

CLEEREMANS, BRUCE, MD
Provider ID: N/A
16405 SAND CANYON AVE STE 220
IRVINE, CA 92618
Effective as of 01-JAN-21

JANKOWSKI, PAWEL, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAY-21

MAHDAD, MEHRDAD, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-OCT-17

MAHDAD, MEHRDAD, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-OCT-17

MAHDAD, MEHRDAD, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 609
IRVINE, CA 92618
Effective as of 01-OCT-17

PARK, JAMES, DO
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22

PATEL, JAY, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-22

IRVINE, CA 92618
Effective as of 01-OCT-19

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IRVINE, CA 92618
Effective as of 01-OCT-08

IRVINE, CA 92618
Effective as of 01-OCT-22

IRVINE, CA 92618
Effective as of 01-OCT-20
C1. 網絡內提供者清單

THAKKAR, SANDEEP, DO†
Provider ID: N/A
16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618
Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO†
Provider ID: N/A
16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618
Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO†
Provider ID: N/A
16405 SAND CANYON AVE
STE 265
IRVINE, CA 92618
Effective as of 01-AUG-22

THAKKAR, SANDEEP, DO†
Provider ID: N/A
16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAR-19

THAKKAR, SANDEEP, DO†
Provider ID: N/A
16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAR-19

THAKKAR, SANDEEP, DO†
Provider ID: N/A
16305 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-MAR-19

WHITMAN, GREGORY, MD
Provider ID: N/A
16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-20

WHITMAN, GREGORY, MD
Provider ID: N/A
16405 SAND CANYON AVE
STE 220
IRVINE, CA 92618
Effective as of 01-JAN-20

NEUROLOGY CHILD

ELBALALESY, NASER, MD†
Provider ID: N/A
113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-JUN-19

ELBALALESY, NASER, MD†
Provider ID: N/A
113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†
Provider ID: N/A
113 WATERWORKS WAY
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IRVINE, CA 92618
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113 WATERWORKS WAY
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ELBALALESY, NASER, MD†
Provider ID: N/A
113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†
Provider ID: N/A
113 WATERWORKS WAY
STE 350
IRVINE, CA 92618
Effective as of 01-AUG-23

NUCLEAR MEDICINE

REDDY, RYAN, MD
Provider ID: N/A
16105 SAND CANYON AVE
STE 215
IRVINE, CA 92618
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<td>HASHMI, EMAD, MD</td>
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C1. 網絡內提供者清單

LEE, KATHERINE, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-23

LIN, JAMES, MD
Provider ID: N/A
16300 SAND CANYON AVE
STE 901
IRVINE, CA 92618
Effective as of 01-SEP-15

MARINESCU, CATALIN, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 265
IRVINE, CA 92618
Effective as of 01-JAN-21

MASAKI, DAMON, MD†
Provider ID: N/A
15785 LAGUNA CANYON RD STE 360
IRVINE, CA 92618
Effective as of 01-JAN-21

MENDELSOHN, SUSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 275
IRVINE, CA 92618
Effective as of 01-MAY-20

YAO, GRACE, MD†
Provider ID: N/A
22 ODYSSEY STE 155
IRVINE, CA 92618
Effective as of 01-JAN-21

GE, NENGJIE, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-JAN-17

GE, NENGJIE, MD†
Provider ID: N/A
16300 SAND CANYON AVE
STE 608
IRVINE, CA 92618
Effective as of 01-MAR-23

GE, NENGJIE, MD†
C1. 網絡內提供者清單

**专科護理醫師**

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<td>LEE, ANDREW, MD</td>
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<td>VAIDYA, NADEEM, MD</td>
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如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
## C1. 網絡內提供者清單

### 專科護理醫師

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<tr>
<th>網絡內提供者</th>
<th>類別</th>
<th>服務類別</th>
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<th>日期有效性</th>
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<td>Vaidya, Nadeem, MD</td>
<td>Provider</td>
<td>CMHC</td>
<td>Vaidya, Nadeem, MD²</td>
<td>N/A</td>
<td>16100 Sand Canyon Ave, Ste 385, Irvine, CA 92618</td>
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<tr>
<td>OwYang, Ashley, OD</td>
<td>Optometrist</td>
<td>CMHC</td>
<td>OwYang, Ashley, OD²</td>
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<td>OwYang, Ashley, OD</td>
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### ORAL MAXILLOFACIAL SURGEON

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<th>日期有效性</th>
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<tr>
<td>Kalantari, Ouzhan, DMD</td>
<td>Surgeon</td>
<td>CMHC</td>
<td>Kalantari, Ouzhan, DMD</td>
<td>N/A</td>
<td>114 Pacifica Ste 420, Irvine, CA 92618</td>
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### OTOLARYNGOLOGY

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<td>Otolaryngologist</td>
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<td>Balaker, Ashley, MD²</td>
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<td>Buen, Floyd, MD</td>
<td>Otolaryngologist</td>
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<td>Buen, Floyd, MD²</td>
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<td>Effective as of 01-Dec-20</td>
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C1. 網絡內提供者清單

專科護理醫師

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<td>01-DEC-20</td>
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<td>GE, NORMAN, MD†</td>
<td>113 WATERWORKS WAY STE 145</td>
<td>01-OCT-20</td>
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<tr>
<td>MUNDI, JAGMEET, MD†</td>
<td>18 ENDEAVOR STE 208</td>
<td>01-OCT-18</td>
</tr>
<tr>
<td>PETTIS, ROBERT, MD†</td>
<td>16100 SAND CANYON AVE STE 230</td>
<td>01-MAY-20</td>
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<tr>
<td>SUN, JOHN, MD†</td>
<td>22 ODYSSEY STE 100</td>
<td>01-MAR-16</td>
</tr>
<tr>
<td>SUN, PAUL, MD†</td>
<td>18 ENDEAVOR STE 208</td>
<td>01-OCT-12</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

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C1. 網絡內提供者清單

专科護理醫師

- **LAI, KHANG, DO**
  - Provider ID: N/A
  - 15701 ROCKFIELD BLVD
  - IRVINE, CA 92618
  - Effective as of 01-APR-11

- **SEKO, KYLE, DO**
  - Provider ID: N/A
  - 9080 IRVINE CENTER DR
  - IRVINE, CA 92618
  - Effective as of 01-NOV-14

- **BOW, LINDA, PA†**
  - Provider ID: N/A
  - 22 ODYSSEY STE 205
  - IRVINE, CA 92618
  - Effective as of 01-SEP-23

- **CARR, OLIVIA, PA**
  - Provider ID: N/A
  - 16305 SAND CANYON AVE STE 200
  - IRVINE, CA 92618
  - Effective as of 01-APR-21

- **KISCADEN, LAUREN, PA**
  - Provider ID: N/A
  - 18 ENDEAVOR STE 208
  - IRVINE, CA 92618
  - Effective as of 01-APR-23

**PHYSICAL MEDICINE / REHABILITATION**

- **LAI, KHANG, DO**
  - Provider ID: N/A
  - 15701 ROCKFIELD BLVD
  - IRVINE, CA 92618
  - Effective as of 01-DEC-14

- **CARR, OLIVIA, PA**
  - Provider ID: N/A
  - 16305 SAND CANYON AVE STE 200
  - IRVINE, CA 92618
  - Effective as of 01-APR-24

- **CHRISTIE, CAMERON, PA**
  - Provider ID: N/A
  - 8607 IRVINE CENTER DR
  - IRVINE, CA 92618
  - Effective as of 01-DEC-23

- **KIM, MOSES, MD†**
  - Provider ID: N/A
  - 16305 SAND CANYON AVE STE 200
  - IRVINE, CA 92618
  - Effective as of 01-APR-24

- **KISCADEN, LAUREN, PA**
  - Provider ID: N/A
  - 18 ENDEAVOR STE 208
  - IRVINE, CA 92618
  - Effective as of 01-APR-23

**PHYSICIANS ASSISTANT**

- **STONE, MICHELLE, PA**
  - Provider ID: N/A
  - 16105 SAND CANYON AVE STE 260
  - IRVINE, CA 92618
  - Effective as of 01-JAN-23

- **STONE, MICHELLE, PA**
  - Provider ID: N/A
  - 16105 SAND CANYON AVE STE 260
  - IRVINE, CA 92618
  - Effective as of 01-JAN-23

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<td><strong>ROOHIAN, ARSHIA, DPM</strong></td>
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<td><strong>SOLAR, SARA, DPM</strong></td>
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C1. 網絡內提供者清單

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<td>ALEXANDER, DEBORAH, PSYD</td>
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<td>15635 ALTON PKWY STE 350 IRVINE, CA 92618</td>
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<td>KANG, EILEEN, PhD</td>
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<td>MORIN, RUTH, PSYD</td>
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**PSYCHOLOGIST**

264
### C1. 網絡內提供者清單
#### 專科護理醫師

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265
C1. 網絡內提供者清單
專科護理醫師

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<td>STE 604</td>
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SURGERY GENERAL

CHUNG, NATHAN, MD†
Provider ID: N/A

| 16405 SAND CANYON AVE |
| STE 230 |
| IRVINE, CA 92618 |
| Effective as of 01-MAR-21 |

CHUNG, NATHAN, MD†
Provider ID: N/A

| 16405 SAND CANYON AVE |
| STE 230 |
| IRVINE, CA 92618 |
| Effective as of 01-MAR-21 |

COLEMAN, COLLEEN, MD
Provider ID: N/A

| 16305 SAND CANYON AVE |
| STE 260 |
| IRVINE, CA 92618 |
| Effective as of 01-JAN-20 |

FORRESTER, JARED, MD
Provider ID: N/A

| 16105 SAND CANYON AVE |
| STE 230 |
| IRVINE, CA 92618 |
| Effective as of 01-OCT-23 |

FORRESTER, JARED, MD
Provider ID: N/A

| 16105 SAND CANYON AVE |
| STE 230 |
| IRVINE, CA 92618 |
| Effective as of 01-OCT-23 |

HAMOUI, NAHID, MD†
Provider ID: N/A

| 16300 SAND CANYON AVE |
| STE 604 |
| IRVINE, CA 92618 |
| Effective as of 01-JAN-20 |

JENSEN, NATISHA, MD
Provider ID: N/A

| 16305 SAND CANYON AVE |
| STE 260 |
| IRVINE, CA 92618 |
| Effective as of 01-AUG-23 |

KRAFT, ELIZABETH, MD
Provider ID: N/A

| 16305 SAND CANYON AVE |
| STE 160 |
| IRVINE, CA 92618 |
| Effective as of 01-OCT-23 |

MACDONALD, HEATHER, MD†
Provider ID: N/A

| 16305 SAND CANYON AVE |
| STE 160 |
| IRVINE, CA 92618 |
| Effective as of 01-OCT-23 |

MILANCHI, SIAMAK, MD†
Provider ID: N/A

| 16300 SAND CANYON AVE |
| STE 604 |
| IRVINE, CA 92618 |
| Effective as of 01-JAN-21 |

NISHANIAN, GARABED, MD†
Provider ID: N/A

| 16300 SAND CANYON AVE |
| STE 604 |
| IRVINE, CA 92618 |
| Effective as of 01-DEC-19 |

HURWITZ, MICHAEL, MD
Provider ID: N/A

| 16100 SAND CANYON AVE |
| STE 350 |
| IRVINE, CA 92618 |
| Effective as of 01-JAN-20 |

NISHANIAN, GARABED, MD†
C1. 網絡內提供者清單

專科護理醫師

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**SURGERY**

**NEUROLOGICAL**

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

ALEXANDER, GERALD, MD
Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-MAR-18

ALI, RAED, MD
Provider ID: N/A
113 WATERWORKS WAY
STE 225
IRVINE, CA 92618
Effective as of 01-OCT-23

ALI, RAED, MD
Provider ID: N/A
113 WATERWORKS WAY
STE 240
IRVINE, CA 92618
Effective as of 01-JAN-23

ALI, RAED, MD
Provider ID: N/A
113 WATERWORKS WAY
STE 225
IRVINE, CA 92618
Effective as of 01-JAN-19

AMINIAN, ARASH, MD
Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-DEC-21

AMINIAN, ARASH, MD
Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-23

AMINIAN, ARASH, MD
Provider ID: N/A
22 ODYSSEY STE 205
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Effective as of 01-NOV-21

AMINIAN, ARASH, MD
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AMINIAN, ARASH, MD
Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-NOV-21

DEBOTTIS, DANIEL, MD
Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-OCT-23

DUNPHY, TAYLOR, MD
Provider ID: N/A
16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-JAN-21

FARRELLY, ERIN, MD
Provider ID: N/A
16300 SAND CANYON AVE
STE 400
IRVINE, CA 92618
Effective as of 01-AUG-23

GITTINGS, DANIEL, MD
Provider ID: N/A
16300 SAND CANYON AVE
STE 511
IRVINE, CA 92618
Effective as of 01-FEB-22
C1. 網絡內提供者清單
專科護理醫師

GITTINGS, DANIEL, MD
Provider ID: N/A
16300 SAND CANYON AVE STE 511
IRVINE, CA 92618
Effective as of 01-NOV-21

GITTINGS, DANIEL, MD
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GITTINGS, DANIEL, MD
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16300 SAND CANYON AVE STE 511
IRVINE, CA 92618
Effective as of 01-FEB-22

GORDON, MICHAEL, MD
Provider ID: N/A
16300 SAND CANYON AVE STE 511
IRVINE, CA 92618
Effective as of 01-JAN-21

GRAHAM, SCOTT, MD
Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-SEP-23

HAGHVERDIAN, BRANDON, MD
Provider ID: N/A
16300 SAND CANYON AVE STE 511
IRVINE, CA 92618
Effective as of 01-DEC-23

HAGHVERDIAN, BRANDON, MD
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22 ODYSSEY STE 205
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Effective as of 01-SEP-23

JOHNSON, BRYCE, MD
Provider ID: N/A
22 ODYSSEY STE 205
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JOHNSON, BRYCE, MD
Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-17

KADAKIA, NIMISH, MD
Provider ID: N/A
22 ODYSSEY STE 205
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KADAKIA, NIMISH, MD
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KADAKIA, NIMISH, MD
Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-MAR-24

KADAKIA, NIMISH, MD
Provider ID: N/A
22 ODYSSEY STE 205
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KADAKIA, NIMISH, MD
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KADAKIA, NIMISH, MD
Provider ID: N/A
22 ODYSSEY STE 205
IRVINE, CA 92618
Effective as of 01-FEB-21
C1. 網路內提供者清單

專科護理醫師

- **KADAKIA, NIMISH, MD**
  - Provider ID: N/A
  - Address: 22 ODYSSEY STE 205, IRVINE, CA 92618
  - Effective as of 01-FEB-21

- **KADAKIA, NIMISH, MD**
  - Provider ID: N/A
  - Address: 22 ODYSSEY STE 205, IRVINE, CA 92618
  - Effective as of 01-JUL-23

- **KASSAM, HAFIZ, MD**
  - Provider ID: N/A
  - Address: 16300 SAND CANYON AVE STE 400, IRVINE, CA 92618
  - Effective as of 01-FEB-22

- **KIM, ABRAHAM, MD**
  - Provider ID: N/A
  - Address: 22 ODYSSEY STE 205, IRVINE, CA 92618
  - Effective as of 01-JAN-24

- **KIM, ABRAHAM, MD**
  - Provider ID: N/A
  - Address: 22 ODYSSEY STE 205, IRVINE, CA 92618
  - Effective as of 01-SEP-23

- **MOLHO, DAVID, MD**
  - Provider ID: N/A
  - Address: 22 ODYSSEY STE 205, IRVINE, CA 92618
  - Effective as of 01-OCT-23

- **NIETO, MICHAEL, MD**
  - Provider ID: N/A
  - Address: 16300 SAND CANYON AVE STE 511, IRVINE, CA 92618
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C1. 網絡內提供者清冊

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<td>WANG, WILLIAM, MD‡</td>
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<td>WHITE, JON, MD‡</td>
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<tr>
<td>16300 SAND CANYON AVE STE 511, IRVINE, CA 92618</td>
<td>01-AUG-17</td>
<td>WHITE, JON, MD‡</td>
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<td>16300 SAND CANYON AVE STE 511, IRVINE, CA 92618</td>
<td>01-AUG-18</td>
<td>WHITE, JON, MD‡</td>
<td>N/A</td>
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C1. 網絡內提供者清單

專科護理醫師

- 16300 SAND CANYON AVE
  STE 511
  IRVINE, CA 92618
  Effective as of 01-OCT-23
  YOUDERIAN, ARI, MD
  Provider ID: N/A
- 22 ODYSSEY STE 205
  IRVINE, CA 92618
  Effective as of 01-SEP-23
  YOUDERIAN, ARI, MD
  Provider ID: N/A

SURGERY THORACIC

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-DEC-23

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-APR-22

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-APR-22

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-APR-22

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-APR-22

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-APR-22

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-APR-22

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-APR-22

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-APR-22

KANAAN, SAMER, MD
Provider ID: N/A
- 4 HUGHES STE 100
  IRVINE, CA 92618
  Effective as of 01-APR-22

Zhang, Joanne, MD
Provider ID: N/A
- 16300 SAND CANYON AVE
  STE 400
  IRVINE, CA 92618
  Effective as of 01-NOV-22

Zhang, Joanne, MD
Provider ID: N/A
- 16300 SAND CANYON AVE
  STE 400
  IRVINE, CA 92618
  Effective as of 01-NOV-22

Zhang, Joanne, MD
Provider ID: N/A
- 16105 SAND CANYON AVE
  IRVINE, CA 92618
  Effective as of 01-APR-19

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
KANAAN, SAMER, MD†  
Provider ID: N/A  
4 HUGHES STE 100  
IRVINE, CA 92618  
Effective as of 01-APR-22

MARMUREANU, ALEXANDRU, MD  
Provider ID: N/A  
5 HOLLAND STE 101  
IRVINE, CA 92618  
Effective as of 01-NOV-23

**UROLOGY**

BIU, DON, MD†  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-JUN-18

BIU, DON, MD†  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-JAN-23

BIU, DON, MD†  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-OCT-22

BIU, DON, MD†  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-JUN-18

BIU, DON, MD†  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-DEC-23

BIU, DON, MD†  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-FEB-23

ELKHOURY, FUAD, MD  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-OCT-23

ELKHOURY, FUAD, MD  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-FEB-23

GRUENENFELDER, JENNIFER, MD  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-DEC-23

GRUENENFELDER, JENNIFER, MD  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-OCT-23

GRUENENFELDER, JENNIFER, MD  
Provider ID: N/A  
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IRVINE, CA 92618  
Effective as of 01-JUN-18

GRUENENFELDER, JENNIFER, MD  
Provider ID: N/A  
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Effective as of 01-OCT-23

GRUENENFELDER, JENNIFER, MD  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-FEB-23

GRUENENFELDER, JENNIFER, MD  
Provider ID: N/A  
16305 SAND CANYON AVE STE 200  
IRVINE, CA 92618  
Effective as of 01-JUN-18
C1. 網絡內提供者清單
專科護理醫師

HO, TAMMY, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

HO, TAMMY, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-FEB-22

HO, TAMMY, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-20

HO, TAMMY, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-MAY-19

HO, TAMMY, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-19

HO, TAMMY, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

MOEGLIA, JAMES, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

KIM, MOSES, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

KIM, MOSES, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

KIM, MOSES, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-23

KIM, MOSES, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-23

KIM, MOSES, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

KIM, MOSES, MD†
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JUN-18

MEAGLIA, JAMES, MD†
Provider ID: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
専科護理醫師

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<td>01-OCT-23</td>
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<th>Address</th>
<th>City, State ZIP</th>
<th>Effective Dates</th>
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<td>SHOURESHI, POONE, MD</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 200</td>
<td>IRVINE, CA 92618</td>
<td>01-AUG-23</td>
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<tr>
<td>SINGH, KARAN, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 200</td>
<td>IRVINE, CA 92618</td>
<td>01-JUN-18</td>
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<tr>
<td>SINGH, KARAN, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 200</td>
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<td>01-JUN-18</td>
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<td>SINGH, KARAN, MD†</td>
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<td>16305 SAND CANYON AVE STE 200</td>
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<td>SINGH, KARAN, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 200</td>
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<td>SINGH, KARAN, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 200</td>
<td>IRVINE, CA 92618</td>
<td>01-JUN-18</td>
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<tr>
<td>SINGH, KARAN, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 200</td>
<td>IRVINE, CA 92618</td>
<td>01-JUN-18</td>
</tr>
<tr>
<td>SPITZ, AARON, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 200</td>
<td>IRVINE, CA 92618</td>
<td>01-OCT-23</td>
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<tr>
<td>SPITZ, AARON, MD†</td>
<td>N/A</td>
<td>16305 SAND CANYON AVE STE 200</td>
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<td>01-OCT-23</td>
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<td>SPITZ, AARON, MD†</td>
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<td>SPITZ, AARON, MD†</td>
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<td>SPITZ, AARON, MD†</td>
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<td>16305 SAND CANYON AVE STE 200</td>
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</tbody>
</table>

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C1. 網絡內提供者清單
專科護理醫師

SPITZ, AARON, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-DEC-19

SU, DANIEL, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

SU, DANIEL, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-SEP-18

TEBYANI, NEYSSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-18

TEBYANI, NEYSSAN, MD
Provider ID: N/A
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STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD
Provider ID: N/A
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STE 200
IRVINE, CA 92618
Effective as of 01-OCT-18

TEBYANI, NEYSSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-JAN-21

TEBYANI, NEYSSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-18

TEBYANI, NEYSSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
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Provider ID: N/A
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Effective as of 01-JUN-18

TEBYANI, NEYSSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

TEBYANI, NEYSSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-18

TEBYANI, NEYSSAN, MD
Provider ID: N/A
16305 SAND CANYON AVE
STE 200
IRVINE, CA 92618
Effective as of 01-OCT-23

ZHAO, HANSON, MD
Provider ID: N/A
<table>
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### C1. 網絡內提供者清單

#### 專科護理醫師

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<td>MADHAV, SANDIP, MD</td>
<td>ANESTHESIOLOGY PAIN MANAGEMENT</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 530 LA JOLLA, CA 92037</td>
<td>01-MAR-21</td>
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<td>01-MAY-23</td>
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<td>TSANG, JOYCE, AuD</td>
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<td>WILLIAMS, ALICIA, AuD</td>
<td>AUDIOLOGIST</td>
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<td>9350 CAMPUS POINT DR STE LLA LA JOLLA, CA 92037</td>
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<td>COHEN, DAVID, MD</td>
<td>CARDIAC ELECTROPHYSIOLOGY</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 940 LA JOLLA, CA 92037</td>
<td>01-MAY-20</td>
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<td>COHEN, DAVID, MD</td>
<td>CARDIAC ELECTROPHYSIOLOGY</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 940 LA JOLLA, CA 92037</td>
<td>01-SEP-21</td>
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<td>HAMZEI, ALI, MD</td>
<td>CARDIAC ELECTROPHYSIOLOGY</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 780 LA JOLLA, CA 92037</td>
<td>01-JAN-21</td>
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<td>MENDENHALL, GEORGE, MD</td>
<td>CARDIAC ELECTROPHYSIOLOGY</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 940 LA JOLLA, CA 92037</td>
<td>01-JAN-23</td>
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<td>MENDENHALL, GEORGE, MD</td>
<td>CARDIAC ELECTROPHYSIOLOGY</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 940 LA JOLLA, CA 92037</td>
<td>01-JUL-18</td>
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<td>PATEL, JIGAR, DO</td>
<td>CARDIAC ELECTROPHYSIOLOGY</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 940 LA JOLLA, CA 92037</td>
<td>01-JUL-18</td>
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</table>
C1. 網絡內提供者清單
専科護理醫師

Provider ID: N/A
9850 GENESEE AVE STE 810
LA JOLLA, CA 92037
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WHITWAM, WAYNE, MD†
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9850 GENESEE AVE STE 780
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CARDIOVASCULAR DISEASE

AIZIN, VITALI, MD†
Provider ID: N/A
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AIZIN, VITALI, MD†
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AVALOS, ROY, MD†
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9850 GENESEE AVE STE 780
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BERMAN, BRETT, MD†
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CARAZO, MATTHEW, MD†
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COHEN, DAVID, MD†
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COSTELLO, DENNIS, MD†
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KARIMIAN, AMIR, MD
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KEEN, WILLIAM, MD†
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KULHANEK, JAN, MD
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MENDENHALL, GEORGE, MD†
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PATEL, JIGAR, DO†
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LA JOLLA, CA 92037
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CHARLAT, MARTIN, MD†
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COHEN, DAVID, MD†
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C1. 網絡內提供者清單

專科護理醫師

RAPEPORT, KEVIN, MD
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9850 GENESEE AVE STE 940B
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RUSSO, ROBERT, MD
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SAB, SHIV, MD
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LA JOLLA, CA 92037
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SHAPIRO, HILARY, MD
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9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
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SHEREV, DIMITRI, MD
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4225 EXECUTIVE SQ STE 450
LA JOLLA, CA 92037
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CERTIFIED
ACUPUNCTURIST

ARELLANO, JACQUELINE, LAC
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8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC
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9400 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-24

ASHMAN, ELLEN, NP
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9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ATILLO, RONALD MAR, NP
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9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

BELL, ANDREA, NP
Provider ID: N/A
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

BIRD, JEREMY, NP
Provider ID: N/A
9300 CAMPUS POINT DR
C1. 網絡內提供者清單

專科護理醫師

LA JOLLA, CA 92037
Effective as of 01-DEC-23

BIRD, JEREMY, NP
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-23

BISCHER, MARGARET, NP
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7855 IVANHOE AVE STE 110
LA JOLLA, CA 92037
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BURNYE, BRAEANNE, NP†
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9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

CAMAQUIN, MIA, NP
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CAMAQUIN, MIA, NP
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-23

CONNOR, CAROLINE, NP†
Provider ID: N/A
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JUN-21

CZYPULL, MONICA, NP
Provider ID: N/A
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-21

CZYPULL, MONICA, NP
Provider ID: N/A
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-21

DE DIOS, SARAH, NP
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

DRISSCOLL, KARRIE, NP†
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

EVANS, ELISABETH, NP
Provider ID: N/A
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037
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GIOVANNETTI, ERIN, NP†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

GOMEZ, LESLIE, NP
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GOSHEN, KIRSTEN, NP†
Provider ID: N/A
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
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GOSHEN, KIRSTEN, NP†
Provider ID: N/A
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HADINGER, JANE, NP
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
9850 GENEESEE AVE STE C129
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-23

HALPERN, DAVID, NP
Provider ID: N/A
9850 GENEESEE AVE STE 320
LA JOLLA, CA 92037
Effective as of 01-JAN-21

HANNA, LINDSAY, NP
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

HEURING, JULIE, NP
Provider ID: N/A
9850 GENEESEE AVE STE 320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

JENKINS, ERIN, NP
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
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JENKINS, ERIN, NP
Provider ID: N/A
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Effective as of 01-AUG-22

JONES, CHRISTA, NP
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9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

JONES, LAILA, NP
Provider ID: N/A
9850 GENEESEE AVE STE 320
LA JOLLA, CA 92037
Effective as of 01-JUN-23

JORJADZE, KETEVAN, NP
Provider ID: N/A
9850 GENEESEE AVE STE 320
LA JOLLA, CA 92037
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KHUAT, LIEN, NP
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

KORMANIK, PATRICIA, NP
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-NOV-23

LEE, MINDY, NP
Provider ID: N/A
9850 GENEESEE AVE STE 440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-23

LOWE, ASHLEY, NP
Provider ID: N/A
9850 GENEESEE AVE STE 560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-23

MAROSOK, MICHELLE, NP
Provider ID: N/A
9898 GENEESEE AVE FL 4
LA JOLLA, CA 92037
Effective as of 01-MAY-16

MATTERA, BETH, NPF
Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-FEB-22

MATTHESS, JANETTE, NP
Provider ID: N/A
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Effective as of 01-FEB-22

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C1. 網絡內提供者清單

專科護理醫師

**SETIAWAN, EUGENIE, NPF**
Provider ID: N/A
📍 9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-DEC-21

**SILVESTRI, NICOLE, NP**
Provider ID: N/A
📍 9850 GENESEE AVE STE 320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

**SOLOMON, AMANDA, NP**
Provider ID: N/A
📍 8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Effective as of 01-JUN-23

**SRILASAK, MICHELE, NP**
Provider ID: N/A
📍 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

**TOMICICH, STEPHANIE, NP**
Provider ID: N/A
📍 9834 GENESEE AVE STE 416
LA JOLLA, CA 92037
Effective as of 01-JAN-21

**TOMICICH, STEPHANIE, NP**
Provider ID: N/A
📍 9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

**TOMICICH, STEPHANIE, NP**
Provider ID: N/A
📍 9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

**TRAN, RICHARD, NPF**
Provider ID: N/A
📍 9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-21

**TRAN, TRAN, NP**
Provider ID: N/A
📍 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

**TRAN, TRAN, NP**
Provider ID: N/A
📍 9300 CAMPUS POINT DR STE C101
LA JOLLA, CA 92037
Effective as of 01-JUN-23

**WILLEY, MARTI, NP**
Provider ID: N/A
📍 9850 GENESEE AVE STE 320
LA JOLLA, CA 92037
Effective as of 01-MAY-21

**WILLEY, MARTI, NP**
Provider ID: N/A
📍 9850 GENESEE AVE STE 560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

**YEO, ALEXANDRIA, NP**
Provider ID: N/A
📍 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23
C1. 網絡內提供者清單

專科護理醫師

ZUNIGA, VANIA, NP
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9850 GENESEE AVE STE 320
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AMADOR, LINDSAY, CRNA
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9300 CAMPUS POINT DR
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Effective as of 01-AUG-22

CALABRIA, MEGAN, CRNA
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CANTRELL, SARAH, CRNA
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COLE, JASON, CRNA
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Effective as of 01-JUL-21

DOLLAND, STEVEN, CRNA
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DULAY, JOTI, CRNA
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EVANS, CATHERINE, CRNA
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LA JOLLA, CA 92037
Effective as of 01-AUG-23

FIEDLER, DEREK, CRNA
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GONZALEZ, LISA, CRNA
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GRiffin, SETH, CRNA
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JOHNSTON, RACHEL, CRNA
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LA JOLLA, CA 92037
Effective as of 01-SEP-23

LAZARUS, ELIZABETH, CRNA
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-JUL-23

POLLKOWSKI, SAMANTHA, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

RAMIREZ, NICOLE, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

ROADMAN, KEENE, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SACKS, BRENT, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

SNODGRASS, JULIE, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-21

SOTO, GILBERTO, CRNA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

CERTIFIED REGISTERED NURSE ANESTHETIST
NURSE MIDWIFE

CHOI, NATHALIE, CRNM
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

Corry, Andrea, CRNM
Provider ID: N/A
8910 Villa La Jolla Dr
La Jolla, CA 92037
Effective as of 01-SEP-23

ELY-KONOSKE, RACHEL, CRNM
Provider ID: N/A
8910 Villa La Jolla Dr
La Jolla, CA 92037
Effective as of 01-DEC-23

NATHAN, CARLY, CRNM
Provider ID: N/A
9300 Campus Point Dr
La Jolla, CA 92037
Effective as of 01-AUG-23

CHIROPRACTOR

BERKOFF, GREGORY, DC
Provider ID: N/A
8950 Villa La Jolla Dr
STE C129
La Jolla, CA 92037
Effective as of 01-MAY-21

CLINICAL

NEUROPSYCHOLOGIST

ALASANTRO, LORI, PhD†
Provider ID: N/A
9850 Genesee Ave STE 470
La Jolla, CA 92037
Effective as of 01-FEB-18

KAUP, ALLISON, PhD†
Provider ID: N/A
9850 Genesee Ave STE 530
La Jolla, CA 92037
Teleservice
Effective as of 01-MAR-21

DERMATOLOGY

CHANG, TIMOTHY, MD†
Provider ID: N/A
9850 Genesee Ave STE 850
La Jolla, CA 92037
Teleservice
Effective as of 01-OCT-21

GONZALES, DARRELL, MD
Provider ID: N/A
9850 Genesee Ave STE 850
La Jolla, CA 92037
Teleservice
Effective as of 01-OCT-21

NASH GOELITZ, ALYSSA, MD†
Provider ID: N/A
9850 Genesee Ave STE 850
La Jolla, CA 92037
Teleservice
Effective as of 01-OCT-21

SIDDIQUI, FARYAL, MD
Provider ID: N/A
7720 Fay Ave
La Jolla, CA 92037
Effective as of 01-MAY-22

EMERGENCY MEDICINE

BLACK, NICHOLAS, MD†
Provider ID: N/A
8910 Villa La Jolla Dr
STE 200
La Jolla, CA 92037
Effective as of 01-SEP-21

CHEN, ALICE, MD†
Provider ID: N/A
8910 Villa La Jolla Dr
STE 100
La Jolla, CA 92037
Teleservice
Effective as of 01-MAY-21

GALUST, HENRIK, MD
Provider ID: N/A
8910 Villa La Jolla Dr
STE 100
La Jolla, CA 92037
Teleservice
Effective as of 01-MAY-21

HARDIN, JEREMY, MD†
Provider ID: N/A
8910 Villa La Jolla Dr
La Jolla, CA 92037
Effective as of 01-AUG-22

HERNANDEZ, CRISTINA, MD†
Provider ID: N/A
8910 Villa La Jolla Dr
STE 100
La Jolla, CA 92037
Effective as of 01-MAY-21
### 網絡內提供者清單

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<th>医生姓名</th>
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<td>HOGUE, BRENNA, MD</td>
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<td>01-SEP-23</td>
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<td>GUERIN, CHRIS, MD</td>
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<td>IYENGAR, RAVI, MD</td>
<td>N/A</td>
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<td>MBA, MBA UZOMA, MD</td>
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<td>PETTUS, JEREMY, MD</td>
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<td>SCHNEIDER, DARIUS, MD</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 470</td>
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C1. 網絡內提供者清單

LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-23

SCHNEIDER, DARIUS, MD
Provider ID: N/A
صاب 9850 GENESEE AVE STE 470
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-21

SHAH, NANDI, MD
Provider ID: N/A
صاب 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SHAH, NANDI, MD
Provider ID: N/A
صاب 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

FAMILY PRACTICE

BOYD, JAMES, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 900
LA JOLLA, CA 92037*
Effective as of 01-JAN-21

JOLICOEUR, MEGAN, DO
Provider ID: N/A
صاب 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

GASTROENTEROLOGY

BORNTNIKER, ETHAN, MD
Provider ID: N/A
صاب 9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GOLDKLANG, ROBERT, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-APR-23

GOLDKLANG, ROBERT, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

HASAN, AWS, MD
Provider ID: N/A
صاب 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

HASAN, AWS, MD
Provider ID: N/A
صاب 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-22

KLAHEKE, ROBERT, MD†
Provider ID: N/A
صاب 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

LAJOIE, ADRIANNE, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MAYER, ANDREW, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 820
LA JOLLA, CA 92037*
Effective as of 01-NOV-14

MAYER, ANDREW, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 820
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MAYER, ANDREW, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 820
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MAYER, ANDREW, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 820
LA JOLLA, CA 92037
Effective as of 01-MAR-23

PAREDEZ, EDWARD, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 820
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

PAREDEZ, EDWARD, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 820
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-22

PAREDEZ, EDWARD, MD†
Provider ID: N/A
صاب 9850 GENESEE AVE STE 820
LA JOLLA, CA 92037
Effective as of 01-SEP-22

MAYO CLINIC SOUTHERN CALIFORNIA

Your PCP’s provider group may have network mental health services providers. Please refer to the list below. You can contact them directly. Please note that some services may require prior authorization from the mental health service provider before being covered.

To view the mental health services provider list online, please visit blueshieldca.com/fad.
C1. 網路內提供者清單

專科護理醫師

LA JOLLA, CA 92037
Teleservice
Effective as of 01-NOV-14

PAREDEZ, EDWARD, MD†
Provider ID: N/A
9850 GENESEE AVE STE 820
LA JOLLA, CA 92037
Teleservice
Effective as of 01-FEB-05

SHAH, SHAILJA, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

SYAL, GAURAV, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SHAH, SHAILJA, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

YOUSSEF, FADY, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

YOUSSEF, FADY, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GENETICS MEDICAL

JONES, MARILYN, MD†
Provider ID: N/A
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
Effective as of 01-JUN-23

GYNECOLOGY

ESKANDER, RAMEZ, MD†
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

HEMATOLOGY / ONCOLOGY

MARSHALL, CATHARINE, MD
Provider ID: N/A
7301 GIRARD AVE STE 300
LA JOLLA, CA 92037
Effective as of 01-NOV-18

SINCLAIR, JAMES, MD†
Provider ID: N/A
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†
Provider ID: N/A
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SINCLAIR, JAMES, MD†
Provider ID: N/A
9850 GENESEE AVE STE 560
LA JOLLA, CA 92037
Effective as of 01-JAN-21

SULLIVAN, JESSICA, DO
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

560
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

CHEN, YU-WEI, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

CHEN, YU-WEI, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-DEC-23

290
### C1. 網絡內提供者清單

#### 專科護理醫師

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<tr>
<td>WALLACH, SABINA, MD†</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 400</td>
<td>01-JAN-24</td>
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<tr>
<td>WALLACH, SABINA, MD†</td>
<td>N/A</td>
<td>9850 GENESEE AVE STE 400</td>
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<td>DOUGLAS, JASON, MD</td>
<td>N/A</td>
<td>9888 GENESEE AVE</td>
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<tr>
<td>FIRESTEIN, CATHERINE, MD†</td>
<td>N/A</td>
<td>9350 CAMPUS POINT DR</td>
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<tr>
<td>HAMMOND, CHARLES, MD†</td>
<td>N/A</td>
<td>9300 CAMPUS POINT DR</td>
<td>01-APR-21</td>
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<td>PAPP, STEPHAN, MD</td>
<td>N/A</td>
<td>9888 GENESEE AVE</td>
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<td>SHUETZ, HESTON, MD</td>
<td>N/A</td>
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<td>SHINDO, YURI, MD†</td>
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<td>MILLER, HOWARD, MD</td>
<td>N/A</td>
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#### HOSPICE AND PALLIATIVE MEDICINE

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<td>RUBENZIK, TAMARA, MD†</td>
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<td>SARWAR, NADIA, MD†</td>
<td>N/A</td>
<td>3252 HOLIDAY CT STE 113</td>
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#### HOSPITALIST MD/DO

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<td>BADALYAN, SEDA, MD†</td>
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<td>COFFLER, ELIANE, MD</td>
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<td>DJEKIC, KRISTINA, DO†</td>
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#### INFECTIOUS DISEASE

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<td>BARTHEL, ROBERT, MD†</td>
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<td>KUPPALLI, KRUTIKA, MD</td>
<td>N/A</td>
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</table>

Your PCP's provider group may have their own network mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require mental health service providers to obtain Blue Shield's prior authorization before coverage is provided.

For online access to mental health service providers, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

專科護理醫師

LA JOLLA, CA 92037
Effective as of 01-FEB-21

RAMIREZ SANCHEZ, CLAUDIA, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

TANG, MICHAEL, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

INTERNAL MEDICINE

BORTZ, DAVID, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

CHETLAPALLI, SURYA, MD†
Provider ID: N/A
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037
Effective as of 01-JAN-21

CROWLEY, DOUGLAS, MD†
Provider ID: N/A
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037
Effective as of 01-JAN-21

DASHI, ARBEN, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-22

GADIYARAM, VARUNA, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

GAN, TERENCE, MD†
Provider ID: N/A
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037
Effective as of 01-SEP-23

GELBERG, ANNA, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

KATSNELSON, MARCELLA, DO
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LAM, PAMELA, DO†
Provider ID: N/A
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LEWIS, GREG, MD†
Provider ID: N/A
9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LEWIS, GREG, MD†
Provider ID: N/A
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LIU, ANDREW, MD
Provider ID: N/A
9834 GENESEE AVE STE 312
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LIU, ANDREW, MD
Provider ID: N/A
4225 EXECUTIVE SQ STE 450
LA JOLLA, CA 92037
Effective as of 01-SEP-23

LUGO, GUSTAVO, MD†
Provider ID: N/A
9850 GENESEE AVE STE 900
LA JOLLA, CA 92037
Effective as of 01-SEP-23

MARTINEZ, ARMANDO, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-21

MCCUTCHEON, CLAIRE, MD†
Provider ID: N/A
9888 GENESEE AVE
LA JOLLA, CA 92037
Effective as of 01-DEC-22

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
## Network Providers List

<table>
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<td>MOOLANI, UJJALA, MD</td>
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1. Your PCP's provider group may have its own network mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, certain services may require the mental health service provider to obtain Blue Shield prior authorization before coverage can be provided.

2. To access the mental health service provider list online, please visit blueshieldca.com/fad.
<table>
<thead>
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<td>N/A</td>
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Please note, some services may require authorization from the Blue Shield provider before being covered.

For online access to the provider list, visit blueshieldca.com/fad.
### 網絡內提供者清單

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| **LAKHERA, YOGITA, MD**                                                      |
| Provider ID: N/A                                                             |
| 9834 GENESEE AVE STE 312                                                     |
| LA JOLLA, CA 92037                                                           |
| Teleservice                                                                  |
| Effective as of 01-JAN-21                                                    |

| **LAKHERA, YOGITA, MD**                                                      |
| Provider ID: N/A                                                             |
| 9834 GENESEE AVE STE 312                                                     |
| LA JOLLA, CA 92037                                                           |
| Teleservice                                                                  |
| Effective as of 01-JUL-22                                                    |

| **LAKHERA, YOGITA, MD**                                                      |
| Provider ID: N/A                                                             |
| 9834 GENESEE AVE STE 312                                                     |
| LA JOLLA, CA 92037                                                           |
| Teleservice                                                                  |
| Effective as of 01-MAR-17                                                    |

| **LAKHERA, YOGITA, MD**                                                      |
| Provider ID: N/A                                                             |
| 9834 GENESEE AVE STE 312                                                     |
| LA JOLLA, CA 92037                                                           |
| Teleservice                                                                  |
| Effective as of 01-MAR-22                                                    |

| **NAMAZY, DAVID, MD**                                                       |
| Provider ID: N/A                                                             |
| 4225 EXECUTIVE SQ STE 450                                                    |
| LA JOLLA, CA 92037                                                           |
| Effective as of 01-JAN-21                                                    |

| **RANA, SHAUNAK, MD**                                                       |
| Provider ID: N/A                                                             |
| 9850 GENESEE AVE STE 320                                                     |
| LA JOLLA, CA 92037                                                           |
| Effective as of 01-NOV-21                                                    |

| **STEER, DYLAN, MD**                                                        |
| Provider ID: N/A                                                             |
| 9834 GENESEE AVE STE 312                                                     |
| LA JOLLA, CA 92037                                                           |
| Effective as of 01-SEP-15                                                    |

| **STEER, DYLAN, MD**                                                        |
| Provider ID: N/A                                                             |
| 9834 GENESEE AVE STE 312                                                     |
| LA JOLLA, CA 92037                                                           |
| Effective as of 01-JAN-21                                                    |

| **STEER, DYLAN, MD**                                                        |
| Provider ID: N/A                                                             |
| 9834 GENESEE AVE STE 312                                                     |
| LA JOLLA, CA 92037                                                           |
| Effective as of 01-DEC-17                                                    |

| **TOROSIAN, KARO, DO**                                                      |
| Provider ID: N/A                                                             |
| 9834 GENESEE AVE STE 312                                                     |
| LA JOLLA, CA 92037                                                           |
| Effective as of 01-SEP-20                                                    |

| **ZHONG, YAN, MD**                                                          |
| Provider ID: N/A                                                             |
| 4225 EXECUTIVE SQ STE 450                                                    |
| LA JOLLA, CA 92037                                                           |
| Effective as of 01-MAR-22                                                    |

### NEUROLOGY

| **ANSARI, HOSSEIN, MD**                                                     |
| Provider ID: N/A                                                             |
| 4180 LA JOLLA VILLAGE DR STE 240                                            |
C1. 網絡內提供者清單
專科護理醫師

LA JOLLA, CA 92037
Effective as of 01-MAY-22

CHOURDRI, BILAL, MD†
Provider ID: N/A
9850 GENESEE AVE STE 470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

DROKER, BRIAN, MD
Provider ID: N/A
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-FEB-16

FRISHBERG, BENJAMIN, MD†
Provider ID: N/A
9850 GENESEE AVE STE 470
LA JOLLA, CA 92037
Effective as of 01-AUG-23

GUPTA, VISHAL, DO
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

HAAS, RICHARD, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

KARANJIA, NAVAZ, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-FEB-22

KOCHARIAN, Naira, MD†
Provider ID: N/A
9850 GENESEE AVE STE 340
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LUHAR, RIYA, DO
Provider ID: N/A
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-23

NIELSEN, AMY, DO†
Provider ID: N/A
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-FEB-21

OH, IRENE, MD†
Provider ID: N/A
9850 GENESEE AVE STE 470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

PADUGA, REMIA, MD†
Provider ID: N/A
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037
Effective as of 01-MAR-21

QAYOUMI, WALI, MD†
Provider ID: N/A
9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

SADOFF, MARK, MD†
Provider ID: N/A
9850 GENESEE AVE STE 470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

SADOFF, MARK, MD†
Provider ID: N/A
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037
Effective as of 01-FEB-21

SCHIM, JACK, MD†
Provider ID: N/A
9850 GENESEE AVE STE 470

C1. 網絡內提供者清單

專科護理醫師

LA JOLLA, CA 92037
Effective as of 01-FEB-16

SCHULTE, JESSICA, MD†
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

WANG, CHUNYANG, MD†
Provider ID: N/A
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037
Effective as of 01-SEP-22

WANG, ANCHI, MD†
Provider ID: N/A
9850 GENESEE AVE STE 470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

WANG, CHUNYANG, MD†
Provider ID: N/A
9850 GENESEE AVE STE 470
LA JOLLA, CA 92037
Effective as of 01-FEB-16

WIEGAND, SARAH, DO†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

NUCLEAR MEDICINE

CHOI, ESTHER, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

CARDENAS, MICHAEL, MD†
Provider ID: N/A
8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
Effective as of 01-NOV-21

KIPPER, MICHAEL, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SHARIF TABRIZI, AHMAD, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD†
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-JUL-21

BONDRE, IOANA, MD†
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

BONDRE, IOANA, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

CARDENAS, MICHAEL, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-21
## C1. 網絡內提供者清單
### 專科護理醫師

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### OPHTHALMOLOGY

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**Your PCP's network may have its own network-internal mental health service providers. Please refer to the below list. You can contact these providers directly. Please note, some services may require a mental health service provider to obtain Blue Shield's prior approval for coverage.**

To access the mental health service provider list online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

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C1. 網絡內提供者清單

专科護理醫師

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9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Effective as of 01-FEB-24

TOPILOW, NICOLE, MD‡
Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

WESTEREN, ALAN, MD
Provider ID: N/A
6529 LA JOLLA BLVD
LA JOLLA, CA 92037
Effective as of 01-JAN-23

ZHAO, TAILUN, MD
Provider ID: N/A
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Effective as of 01-JAN-24

OPTOMETRIST

GARDNER, KRISTA, OD‡
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C130

LA JOLLA, CA 92037
Teleservice
Effective as of 01-MAY-22

HOO, PAMELA, OD‡
Provider ID: N/A
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

JOMOC, CAITLIN, OD
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9415 CAMPUS POINT DR
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Effective as of 01-JUL-23

JULAZADEH, SARA, OD
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LA JOLLA, CA 92037
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TAUNTON, PHILIP, OD‡
Provider ID: N/A
9834 GENESEE AVE STE 428
LA JOLLA, CA 92037
Effective as of 01-SEP-23

YU, CAROL, OD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-23

OTOLARYNGOLOGY
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如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

FRIEDMAN, RICK, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD
Provider ID: N/A
9400 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GILANI, SAPIDEH, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GREENE, JACQUELINE, MD
Provider ID: N/A
9300 CAMPUS POINT DR
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Effective as of 01-MAY-23

GREENE, JACQUELINE, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

GUO, THERESA, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD
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9300 CAMPUS POINT DR
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Effective as of 01-MAY-23

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Effective as of 01-MAY-23

HARRIS, JEFFREY, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HOM, DAVID, MD
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HOM, DAVID, MD
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23
C1. 網絡內提供者清單
專科護理醫師

KARI, ELINA, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-AUG-23

HOM, DAVID, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HOM, DAVID, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUGHES, CHARLOTTE, MD
Provider ID: N/A
9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD
Provider ID: N/A
9400 CAMPUS POINT DR
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KARI, ELINA, MD
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KARI, ELINA, MD
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KARI, ELINA, MD
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
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MAGIT, ANTHONY, MD
Provider ID: N/A
9400 CAMPUS POINT DR
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MAGIT, ANTHONY, MD
Provider ID: N/A
9350 CAMPUS POINT DR
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MAGIT, ANTHONY, MD
Provider ID: N/A
9300 CAMPUS POINT DR
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MATSUOKA, AKIHIRO, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

HUSSEMAN, JACOB, MD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

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C1. 網絡內提供者清單
專科護理醫師

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
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NGUYEN, QUYEN, MD
Provider ID: N/A
3855 HEALTH SCIENCES DR
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NGUYEN, QUYEN, MD
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NGUYEN, QUYEN, MD
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NGUYEN, QUYEN, MD†
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9300 CAMPUS POINT DR
LA JOLLA, CA 92037
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NGUYEN, QUYEN, MD
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

REUTHER, MARSHA, MD†
Provider ID: N/A
4150 REGENTS PARK ROW STE 345
LA JOLLA, CA 92037
Effective as of 01-AUG-23

REUTHER, MARSHA, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD†
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WATSON, DEBORAH, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

WATSON, DEBORAH, MD†
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9350 CAMPUS POINT DR
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WATSON, DEBORAH, MD
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VAHABZADEH-HAGH, ANDREW, MD
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LA JOLLA, CA 92037
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD
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LA JOLLA, CA 92037
Effective as of 01-MAY-23

YAN, CAROL, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Effective as of 01-MAY-23

PEDIATRICS

GROBMAN, LILLIAN, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

KOOROS, KOOROSH, MD†
Provider ID: N/A
4150 REGENTS PARK ROW
STE 345
LA JOLLA, CA 92037
Effective as of 01-FEB-22

PHYSICAL MEDICINE / REHABILITATION

MADHAV, SANDIP, MD†
Provider ID: N/A
9850 GENESEE AVE STE 530
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

PHYSICIANS ASSISTANT

ABDELWAHHAB, EANAS, PA
Provider ID: N/A
C1. 網絡內提供者清單
專科護理醫師

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<td>CANDARE, VANESSA, PA</td>
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<td>CASO, STEPHEN, PA</td>
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<td>DOUGHERTY, CLARA, PA</td>
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<td>DOUGHERTY, CLARA, PA</td>
<td>9850 GENESEE AVE STE 440, LA JOLLA, CA 92037</td>
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<td>FELLION, LAUREN, PA</td>
<td>9850 GENESEE AVE STE 320, LA JOLLA, CA 92037</td>
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<td>01-MAY-23</td>
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<tr>
<td>FLORENCE, BRYNA, PA</td>
<td>9850 GENESEE AVE STE 320, LA JOLLA, CA 92037</td>
<td>N/A</td>
<td>01-AUG-21</td>
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<tr>
<td>FREY, LAUREN, PA</td>
<td>9850 GENESEE AVE STE 320, LA JOLLA, CA 92037</td>
<td>N/A</td>
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C1. 網絡內提供者清單

專科護理醫師

8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Effective as of 01-JAN-22

HUNTER, JACOB, PA
Provider ID: N/A
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Effective as of 01-MAY-21

HUNTER, JACOB, PA
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

HUNTER, JACOB, PA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

HUNTER, JACOB, PA
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-APR-21

OKADA, MICHELLE, PA
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-APR-21

OKADA, MICHELLE, PA
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-APR-21

PAAMONI, ARIELLE, PA
Provider ID: N/A
9850 GENESEE AVE STE 320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-AUG-22

PELIO, DARREN, PA
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PELIO, DARREN, PA
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-22

PERREAULT, MARK, PA
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-AUG-21

PERREAULT, MARK, PA
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-AUG-21
C1. 網絡內提供者清單

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<td>9850 GENESEE AVE STE 530</td>
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*Teleservice*
PREVENTATIVE MEDICINE
GENERAL

STERN, ANNA, MD
Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-24

PSYCHIATRY

BRAR, SIMERJEET, MD†
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-AUG-21

FINN, DAPHNA, MD†
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-FEB-22

karippot, anoop, MD†
Provider ID: N/A
9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-22

LIU, FRED, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

KARIPPOT, ANOOP, MD†
Provider ID: N/A
9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†
Provider ID: N/A
9850 GENESEE AVE STE
710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-22
MOORE, SHAVON, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-NOV-21

MOORE, SHAVON, MD†
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NICHOLS, ALPHONSO, MD
Provider ID: N/A
9850 GENESEE AVE STE 710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD
Provider ID: N/A
9850 GENESEE AVE STE 710
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUL-22

QAYOUMI, WALI, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-SEP-22

QAYOUMI, WALI, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†
Provider ID: N/A
9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-OCT-21

QAYOUMI, WALI, MD†
Provider ID: N/A
9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Effective as of 01-SEP-22

REGO-KEARNEY, JENNIFER, MD†
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-NOV-21

REGO-KEARNEY, JENNIFER, MD†
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

REGO-KEARNEY, JENNIFER, MD†
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-OCT-23

SCHNEEBERGER, ANDRES, MD†
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-AUG-22

SCHNEEBERGER, ANDRES, MD†
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C217
LA JOLLA, CA 92037
Effective as of 01-AUG-22

TARVER, LESLIE, MD†
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C1. 網絡內提供者清單

網路內提供者清單

 Provider ID: N/A
  8950 VILLA LA JOLLA DR
   STE C217
   LA JOLLA, CA 92037
   Effective as of 01-OCT-23

PSYCHIATRY SLEEP MEDICINE

KARIPPOT, ANoop, MD†
Provider ID: N/A
  9850 GENESEE AVE STE 710
   LA JOLLA, CA 92037
   Teleservice
   Effective as of 01-JAN-23

CRANDAL, BRENT, PhD†
Provider ID: N/A
  8950 VILLA LA JOLLA DR
   STE C101
   LA JOLLA, CA 92037
   Effective as of 01-AUG-22

KAUP, ALLISON, PhD†
Provider ID: N/A
  9850 GENESEE AVE STE 530
   LA JOLLA, CA 92037
   Teleservice
   Effective as of 01-JAN-24

BAILIS, JESSICA, PSYD
Provider ID: N/A
  8950 VILLA LA JOLLA DR
   STE C101
   LA JOLLA, CA 92037
   Effective as of 01-JUN-23

CUSACK, ANNE, PSYD
Provider ID: N/A
  8950 VILLA LA JOLLA DR
   STE C101
   LA JOLLA, CA 92037
   Effective as of 01-DEC-23

EICHEN, DAWN, PhD
Provider ID: N/A
  3344 N TORREY PINES CT
   LA JOLLA, CA 92037
   Effective as of 01-DEC-23

MINASSIAN, ARPI, PhD†
Provider ID: N/A
  9300 CAMPUS POINT DR
   LA JOLLA, CA 92037
   Effective as of 01-NOV-21

KAUP, ALLISON, PhD†
Provider ID: N/A
  9400 CAMPUS POINT DR
   LA JOLLA, CA 92093
   Effective as of 01-NOV-21

MINASSIAN, ARPI, PhD†
Provider ID: N/A
  9300 CAMPUS POINT DR
   LA JOLLA, CA 92037
   Effective as of 01-NOV-21
C1. 網絡內提供者清單

專科護理醫師

**MINASSIAN, ARPI, PhD**
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-NOV-21

**PARK, JESSIE, PSYD**
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-DEC-21

**PARK, JESSIE, PSYD**
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-DEC-21

**REED, KRISTIE, PhD**
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037
Effective as of 01-AUG-22

**REED, KRISTIE, PhD**
Provider ID: N/A
3344 N TORREY PINES CT
LA JOLLA, CA 92037
Effective as of 01-DEC-23

**REED, KRISTIE, PhD**
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037
Effective as of 01-AUG-22

**REED, KRISTIE, PhD**
Provider ID: N/A
3344 N TORREY PINES CT
LA JOLLA, CA 92037
Effective as of 01-DEC-23

**TARLE, STEPHANIE, PhD**
Provider ID: N/A
8950 VILLA LA JOLLA DR
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LA JOLLA, CA 92037
Effective as of 01-DEC-23

**TARLE, STEPHANIE, PhD**
Provider ID: N/A
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Effective as of 01-DEC-23

**PUBLIC HEALTH**  
**PREVENTATIVE MEDICINE**

**PERLMAN, MONICA, MD**
Provider ID: N/A
9850 GENESEE AVE STE
320
LA JOLLA, CA 92037
Effective as of 01-DEC-21

**CORATE, LALAINE, MD**
Provider ID: N/A
9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JUL-20

**FE, ALEXANDER, MD**
Provider ID: N/A
9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-SEP-21

**FRICKS, CARL, MD**
Provider ID: N/A
9850 GENESEE AVE STE
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LA JOLLA, CA 92037
Effective as of 01-JAN-21

**FRICKS, CARL, MD**
Provider ID: N/A
9850 GENESEE AVE STE
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LA JOLLA, CA 92037
Effective as of 01-JUL-20

**GLICKMAN, SAMUEL, MD**
Provider ID: N/A
9850 GENESEE AVE STE
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LA JOLLA, CA 92037
Effective as of 01-JAN-21

**JONES, DANIEL, MD**
Provider ID: N/A
9850 GENESEE AVE STE
370
LA JOLLA, CA 92037
Effective as of 01-JAN-21

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
### C1. 網絡內提供者清單
**專科護理醫師**

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**RADIATION ONCOLOGY**

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**RADIOLOGY DIAGNOSTIC**

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C1. 網絡內提供者清單

專科護理醫師

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<td>AMMIRATI, GUISEPPE, MD†</td>
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<td>BUI, KEVIN, MD†</td>
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<td>CARSWELL, AIMEE, MD</td>
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<td>CHO, AARON, MD</td>
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<td>EAJAZI, ALIREZA, MD†</td>
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<td>EGHTEDEARI, MOHAMMAD, MD</td>
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<td>HANDWERKER, JASON, MD</td>
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<td>HAWLEY, DANIEL, MD</td>
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<td>HUANG, BRADY, MD</td>
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<td>JACOBS, KATHLEEN, MD</td>
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<td>JACOBSON, JON, MD</td>
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<tr>
<td>JAFFRAY, PAUL, MD</td>
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<tr>
<td>LIM, VIVIAN, MD</td>
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<td>MAREK BYKOWSKI, JULIE, MD</td>
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<td>MARKS, ROBERT, MD</td>
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<td>MCDONALD, MARIN, MD</td>
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<td>MCDONALD, MARIN, MD²</td>
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<td>MCNAMEE, CAIRINE, MD</td>
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<td>MURPHY, PAUL, MD</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務或能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

- NORBASH, ALEXANDER, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- OBOYLE, MARY, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- OBOYLE, MARY, MD†
  Provider ID: N/A
  9300 CAMPUS POINT DR
  LA JOLLA, CA 92037
  Effective as of 01-FEB-22

- OJEDA-FOURNIER, HAYDEE, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- PATHRIA, MINI, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- RAKOW-PENNER, REBECCA, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- RESNICK, DONALD, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- RITCHIE, DAVID, MD
  Provider ID: N/A
  9300 CAMPUS POINT DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- SADAT, SAYED, DO
  Provider ID: N/A
  9300 CAMPUS POINT DR
  LA JOLLA, CA 92037
  Effective as of 01-JUN-23

- SAMPATH, SRIHARI, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- SAMPATH, SRINATH, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- SANTILLAN, CYNTHIA, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- SEARLEMAN, ADAM, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- SLATER, JERRY, MD†
  Provider ID: N/A
  9300 CAMPUS POINT DR
  LA JOLLA, CA 92037
  Effective as of 01-AUG-21

- SMITAMAN, EDWARD, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- SPENGLER, NATHAN, MD
  Provider ID: N/A
  9300 CAMPUS POINT DR
  LA JOLLA, CA 92037
  Effective as of 01-DEC-23

- STEINBERGER, AMANDA, DO
  Provider ID: N/A
  9850 GENESEE AVE STE 410
  LA JOLLA, CA 92037
  Teleservice
  Effective as of 01-OCT-23

- STEINBERGER, AMANDA, DO
  Provider ID: N/A
  9850 GENESEE AVE STE 410
  LA JOLLA, CA 92037
  Teleservice
  Effective as of 01-JAN-24

- TAMAYO-MURILLO, DORATHY, MD
  Provider ID: N/A
  9452 MEDICAL CENTER DR
  LA JOLLA, CA 92037
  Effective as of 01-APR-23

- THOMPSON, COLE, MD
  Provider ID: N/A
  9300 CAMPUS POINT DR
  LA JOLLA, CA 92037
  Effective as of 01-JUN-23

- UNSDORFER, KYLE, MD
  Provider ID: N/A
  9300 CAMPUS POINT DR
  LA JOLLA, CA 92037
  Effective as of 01-JUN-23
LA JOLLA, CA 92037
Effective as of 01-JUN-23

VAHDOT, NOUSHIN, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

YORK, VINCENT, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-AUG-21

REGISTERED DIETITIAN / NUTRITIONIST

SALCEDO, ALEXANDRA, RD
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

REGISTERED PHYSICAL THERAPIST

CAPONETTI, ELLIOTT, PT
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

CAPONETTI, ELLIOTT, PT
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

FERRER, MIRON, PT
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

GILLILAND, TYLER, PT
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

HOUSELY, ALEXIS, PT
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUN-23

SHARP, SIMPSON, PT
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

TROYER, CORY, PT
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

RHEUMATOLOGY

KIM, JANET, MD
Provider ID: N/A
9850 GENESEE AVE STE 420
LA JOLLA, CA 92037
Effective as of 01-FEB-17

SPEECH PATHOLOGIST

BLUMENFELD, LIZA, SP
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-MAY-23

LINNEMEYER-RISSER, KRISTEN, SP
Provider ID: N/A
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
Effective as of 01-MAY-23

NEESE, SUSAN, SP
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JAN-24

RHEUMATOLOGY

KIM, JANET, MD
Provider ID: N/A
9850 GENESEE AVE STE 420
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SCHIEDERMAYER, BENJAMIN, SP
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-APR-22

SCHIEDERMAYER, BENJAMIN, SP
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-APR-22

THOMPSON, DANIELLE, SP
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-APR-22
C1. 網絡內提供者清單
專科護理醫師

DR
LA JOLLA, CA 92093
Effective as of 01-JAN-24

SURGERY COLON
SURGERY
BEIERMEISTER, KEITH, MD†
Provider ID: N/A
9834 GENESEE AVE STE 201
LA JOLLA, CA 92037
Effective as of 01-AUG-13

BEIERMEISTER, KEITH, MD†
Provider ID: N/A
9834 GENESEE AVE STE 201
LA JOLLA, CA 92037
Effective as of 01-JAN-21

LOPEZ, NICOLE, MD†
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-JAN-21

PARRY, LISA, MD†
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-DEC-21

RAMAMOORTHY, SONIA, MD†
Provider ID: N/A
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

SCHULTZEL, MATTHEW, DO†
Provider ID: N/A
4150 REGENTS PARK ROW STE 345
LA JOLLA, CA 92037
Effective as of 01-SEP-22

WORSEY, MICHAEL, MD†
Provider ID: N/A
9834 GENESEE AVE STE 201
LA JOLLA, CA 92037
Effective as of 01-JAN-21

WORSEY, MICHAEL, MD†
Provider ID: N/A
9834 GENESEE AVE STE 201
LA JOLLA, CA 92037
Effective as of 01-AUG-12

SURGERY CRITICAL CARE
ADAMS, LAURA, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

VENTRO, GEORGE, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-22

SURGERY GENERAL
ARMANI,AVA,MD†
Provider ID: N/A
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Effective as of 01-APR-21

BHONYRUL, SUNIL, MD†
Provider ID: N/A
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BORTZ, PASCAL, MD†
Provider ID: N/A
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
Effective as of 01-JAN-21

BORTZ, PASCAL, MD†
Provider ID: N/A
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
Effective as of 01-AUG-23

BURGESS, DANIEL, DO†
Provider ID: N/A
4150 REGENTS PARK ROW STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JUN-21

BURGESS, DANIEL, DO†
Provider ID: N/A
4150 REGENTS PARK ROW STE 345
LA JOLLA, CA 92037
Teleservice
Effective as of 01-OCT-23

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C1. 網絡內提供者清單
專科護理醫師

HORGAN, SANTIAGO, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-DEC-21

MORELL, MICHAEL, MD
Provider ID: N/A
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
Effective as of 01-DEC-23

MORELL, MICHAEL, MD
Provider ID: N/A
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
Effective as of 01-MAR-24

OLSON, CHERYL, MD
Provider ID: N/A
9850 GENESEE AVE STE 660
LA JOLLA, CA 92037
Effective as of 01-APR-17

OLSON, CHERYL, MD†
Provider ID: N/A
9850 GENESEE AVE STE 660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

SCHULTZEL, MATTHEW, DO†
Provider ID: N/A
4150 REGENTS PARK ROW

SHAPERA, EMANUEL, MD
Provider ID: N/A
9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
Effective as of 01-FEB-24

SHERMAN, MARK, MD
Provider ID: N/A
9850 GENESEE AVE STE 660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

SCHULTZEL, MATTHEW, DO†
Provider ID: N/A
4150 REGENTS PARK ROW

SHERMAN, MARK, MD
Provider ID: N/A
9850 GENESEE AVE STE 660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

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Effective as of 01-FEB-23

SHERMAN, MARK, MD
Provider ID: N/A
9850 GENESEE AVE STE 660
LA JOLLA, CA 92037
Effective as of 01-FEB-23

BROWN, RICHARD, MD†
Provider ID: N/A
9850 GENESEE AVE STE 210
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

SHAPERA, EMANUEL, MD
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9850 GENESEE AVE STE 570
LA JOLLA, CA 92037
Effective as of 01-JUN-20

DOWNING, KRISTOPHER, MD†
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9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-MAY-18

SURGERY HAND
ORTHOPEDIC

STEPHENSON, SAMUEL, MD†
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-OCT-21

STEPHENSON, SAMUEL, MD†
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-OCT-21

SURGERY
NEUROLOGICAL

MURTHY, NIKHIL, MD
Provider ID: N/A
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

MURTHY, NIKHIL, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23
C1. 網絡內提供者清單

專科護理醫師

OSTRUP, RICHARD, MD†
Provider ID: N/A
 대해서 9850 GENESEE AVE STE 770
LA JOLLA, CA 92037
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SURGERY ORTHOPEDIC

ANDRY, JAMES, MD
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

ANDRY, JAMES, MD
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

BLAIS, MICAH, MD
Provider ID: N/A
 대해서 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-JUL-23

BLAIS, MICAH, MD
Provider ID: N/A
 대해서 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUL-23

BUKATA, SUSAN, MD†
Provider ID: N/A
 대해서 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-MAR-21

CHOI, JIHOON, MD†
Provider ID: N/A
 대해서 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

LA JOLLA, CA 92037
Effective as of 01-SEP-21

CHOI, JIHOON, MD†
Provider ID: N/A
 대해서 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

DOWNING, KRISTOPHER, MD†
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD†
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-MAR-24

GOEB, YANNICK, MD†
Provider ID: N/A
 대해서 9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Effective as of 01-SEP-21

GOEB, YANNICK, MD†
Provider ID: N/A
 대해서 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-21

HACKLEY, DAVID, MD†
Provider ID: N/A
 대해서 9850 GENESEE AVE STE 210
LA JOLLA, CA 92037
Effective as of 01-JAN-21

KANE, NORMAN, MD
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-APR-24

KUSNEZOV, NICHOLAS, MD
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-APR-24

MARSHALL, STUART, MD
Provider ID: N/A
 대해서 7301 GIRARD AVE STE 300
LA JOLLA, CA 92037
Effective as of 01-SEP-21

MCKNIGHT, BRADEN, MD
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-SEP-21

MOHLENBROCK, WILLIAM, MD
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PALLIA, CHRISTOPHER, MD
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PALLIA, CHRISTOPHER, MD
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PALLIA, CHRISTOPHER, MD
Provider ID: N/A
 대해서 9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Effective as of 01-SEP-21

PALLIA, CHRISTOPHER, MD
Provider ID: N/A

323
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<th>Provider</th>
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<th>Effective Date</th>
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<td>9834 GENESEE AVE STE 228, LA JOLLA, CA 92037</td>
<td>01-MAR-24</td>
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<tr>
<td>SWENSON, FRANK, MD</td>
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<td>9850 GENESEE AVE STE 228, LA JOLLA, CA 92037</td>
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<td>THUNDER, RICHARD, MD</td>
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<td>01-JAN-21</td>
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<td>WHEATLEY, BENJAMIN, MD</td>
<td>9850 GENESEE AVE STE 210, LA JOLLA, CA 92037</td>
<td>01-JAN-21</td>
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<td>01-MAY-17</td>
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<td>BARADARIAN, SAM, MD</td>
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<td>10666 N TORREY PINES RD STE 209, LA JOLLA, CA 92037</td>
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<td>MOASIS, GHASSAN, MD</td>
<td>9898 GENESEE AVE STE 210, LA JOLLA, CA 92037</td>
<td>01-JAN-21</td>
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C1. 網絡內提供者清單

網絡內提供者清單

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<th>Provider</th>
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<th>Effective Date</th>
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<td>Your PCP's provider group may have network psychiatrists. Please refer to the list below. You may contact these providers directly. Please note, certain services may require prior authorization from the psychiatrists to be covered. For online access to the psychiatrist provider list, please visit blueshieldca.com/fad.</td>
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<tr>
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**Surgical Oncology**

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**Urology**

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<td>9400 CAMPUS POINT DR LA JOLLA, CA 92037</td>
<td>01-JAN-22</td>
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Your PCP's provider group may have its own network providers for mental health services. Please refer to the list below. You may directly contact these providers. Please note, some services may require prior authorization from the mental health service provider before they are covered. To access the mental health service provider list online, visit [blueshieldca.com/fad](http://blueshieldca.com/fad).
Effective as of 01-JAN-21

NAITO, JOHN, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-JUL-22

NAITO, JOHN, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-NOV-21

NAITO, JOHN, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-NOV-98

NAITO, JOHN, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

NAITO, JOHN, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-SEP-24

NEUSTEIN, PAUL, MD
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

NGUYEN, HUNG, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

NGUYEN, HUNG, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-JAN-21

NGUYEN, HUNG, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-19

NGUYEN, HUNG, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Teleservice
Effective as of 01-SEP-21

PE, MARK-RALLY, MD
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SALEM, CAROL, MD
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-FEB-24

SALMASI, AMIRALI, MD
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

SHEETZ, TYLER, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-SEP-23

SIMON, SCOTT, MD
Provider ID: N/A
9834 GENESEE AVE STE 224
LA JOLLA, CA 92037
Effective as of 01-JUN-23

VAPNEK, EVAN, MD
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-JAN-24

WANG, LUKE, MD
Provider ID: N/A
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Effective as of 01-JUN-23

YUH, BENJAMIN, MD†
Provider ID: N/A
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
C1. 網絡內提供者清單
専科護理醫師

Effective as of 01-JAN-23

YUH, BENJAMIN, MD†
Provider ID: N/A
.unsplash
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Effective as of 01-SEP-22

LEE, INSUN, MD†
Provider ID: N/A
.unsplash
5360 JACKSON DR STE 100
LA MESA, CA 91942
Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD
Provider ID: N/A
.unsplash
7051 ALVARADO RD STE 101
LA MESA, CA 91942
Effective as of 01-MAR-22

HORNER, HEATHER, AuD†
Provider ID: N/A
.unsplash
5565 GROSSMONT CENTER DR STE 463
LA MESA, CA 91942
Effective as of 01-JAN-21

SHASKY, GARY, AuD†
Provider ID: N/A
.unsplash
5565 GROSSMONT CENTER DR STE 153
LA MESA, CA 91942
Effective as of 01-JAN-21

BELOTT, PETER, MD†
Provider ID: N/A
.unsplash
8851 CENTER DR STE 305
LA MESA, CA 91942
Effective as of 01-MAR-22

DAWOOD, FARAH, MD†
Provider ID: N/A
.unsplash
8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

FERNANDEZ, GENARO, MD†
Provider ID: N/A
.unsplash
8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

KIM, JAMES, MD
Provider ID: N/A
.unsplash
5358 JACKSON DR STE 1

Anesthesiology

CHIEN, SHELBY, MD†
Provider ID: N/A
.unsplash
5360 JACKSON DR STE 100
LA MESA, CA 91942
Effective as of 01-APR-24

VERDOLIN, MICHAEL, MD
Provider ID: N/A
.unsplash
5360 JACKSON DR STE 100
LA MESA, CA 91942
Effective as of 01-JAN-21

VERDOLIN, MICHAEL, MD
Provider ID: N/A
.unsplash
5360 JACKSON DR STE 100
LA MESA, CA 91942
Effective as of 01-FEB-24

Cohens Zachary, MD

Audioologist

Horner, Heather, AuD†
Provider ID: N/A
.unsplash
5565 GROSSMONT CENTER DR STE 3 STE 444
LA MESA, CA 91942
Effective as of 01-FEB-21

SHASKY, GARY, AuD†
Provider ID: N/A
.unsplash
5565 GROSSMONT CENTER DR STE 153
LA MESA, CA 91942
Effective as of 01-JAN-21

Belott, Peter, MD†
Provider ID: N/A
.unsplash
8851 CENTER DR STE 305
LA MESA, CA 91942
Effective as of 01-SEP-22

Fernandez, Genaro, MD†
Provider ID: N/A
.unsplash
8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

Kim, James, MD
Provider ID: N/A
.unsplash
5358 JACKSON DR STE 1

Cardiac Electrophysiology

BROWNLLOW, ROY, MD
Provider ID: N/A
.unsplash
5360 JACKSON DR STE 100
LA MESA, CA 91942
Effective as of 01-FEB-24

COHEN, ZACHARY, MD

Anesthesiology Pain Management

DAWOOD, FARAH, MD†
Provider ID: N/A
.unsplash
8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-DEC-20

Cardiovascular Disease

AZIMI, NASSIR, MD†
Provider ID: N/A
.unsplash
8851 CENTER DR STE 3 STE 444
LA MESA, CA 91942
Effective as of 01-JAN-21

AZIMI, NASSIR, MD†
Provider ID: N/A
.unsplash
8851 CENTER DR STE 3 STE 444
LA MESA, CA 91942
Effective as of 01-SEP-22

BELOTT, PETER, MD†
Provider ID: N/A
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8851 CENTER DR STE 305
LA MESA, CA 91942
Effective as of 01-APR-17

DAWOOD, FARAH, MD†
Provider ID: N/A
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8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

FERNANDEZ, GENARO, MD†
Provider ID: N/A
.unsplash
8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-AUG-21

KIM, JAMES, MD
Provider ID: N/A
.unsplash
5358 JACKSON DR STE 1
KIM, JAMES, MD
Provider ID: N/A
5358 JACKSON DR STE 1
LA MESA, CA 91942
Teleservice
Effective as of 01-JUN-23

KOTHA, PURUSHOTHAM, MD
Provider ID: N/A
8860 CENTER DR STE 400
LA MESA, CA 91942
Effective as of 01-JAN-21

MENHANPOUR, PAYAM, MD
Provider ID: N/A
8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-SEP-22

SHEREV, DIMITRI, MD
Provider ID: N/A
8851 CENTER DR STE 304
LA MESA, CA 91942
Effective as of 01-APR-23

CERTIFIED NURSE PRACTITIONER

DWYER, ERIN, NP
Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

HALE, EMILY, NPF
Provider ID: N/A
5360 JACKSON DR STE 100
LA MESA, CA 91942
Teleservice
Effective as of 01-MAY-23

MCCALLION, DANIELLE, NP
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-23

MCCALLION, DANIELLE, NP
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-23

MEGERT, SONYA, NP
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Effective as of 01-AUG-23

TOMICICH, STEPHANIE, NP
Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942
Effective as of 01-JAN-24

WOLF, ELI, NP
Provider ID: N/A
7339 EL CAJON BLVD STE I
LA MESA, CA 91942
Effective as of 01-OCT-23

HEARING AID DEALER / SUPPLIER

ANDERSON, ELAINE, MA
Provider ID: N/A
5565 GROSSMONT CENTER DR
LA MESA, CA 91942
Effective as of 01-FEB-18

ZU, KAI, MD
Provider ID: N/A
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-24
C1. 網絡內提供者清單

專科護理醫師

- 5555 GROSSMONT CENTER DR
  LA MESA, CA 91942
  Teleservice
  Effective as of 01-JAN-21
- HADDAD, FADI, MD
  Provider ID: N/A
  8860 CENTER DR STE 320
  LA MESA, CA 91942
  Effective as of 01-JUN-23
- MIRADI, MOHAMMED, MD†
  Provider ID: N/A
  5565 GROSSMONT CENTER DR BLDG 1 STE 211
  LA MESA, CA 91942
  Effective as of 01-SEP-22
- MIRADI, MOHAMMED, MD†
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  5565 GROSSMONT CENTER DR BLDG 1 STE 211
  LA MESA, CA 91942
  Effective as of 01-APR-15
- FADDA, GEORGE, MD†
  Provider ID: N/A
  8851 CENTER DR STE 505
  LA MESA, CA 91942
  Effective as of 01-NOV-22
- FARARVARDEH, ARMAN, MD†
  Provider ID: N/A
  8851 CENTER DR STE 505
  LA MESA, CA 91942
  Effective as of 01-SEP-14
- FERNANDEZ, GENARO, MD†
  Provider ID: N/A
  8851 CENTER DR STE 304
  LA MESA, CA 91942
  Effective as of 01-SEP-22
- KOTHA, ROSHAN, MD†
  Provider ID: N/A
  8860 CENTER DR STE 400
  LA MESA, CA 91942
  Effective as of 01-SEP-15
- LEININGER, DANIEL, DO†
  Provider ID: N/A
  8851 CENTER DR STE 505
  LA MESA, CA 91942
  Teleservice
  Effective as of 01-NOV-22
- LIU, ANDREW, MD
  Provider ID: N/A
  8851 CENTER DR STE 505
  LA MESA, CA 91942
  Effective as of 01-SEP-23
- MOOLANI, UJJALA, MD
  Provider ID: N/A
  8851 CENTER DR STE 505
  LA MESA, CA 91942
  Effective as of 01-MAY-23
- POKALA, SATHYA, MD†
  Provider ID: N/A
  8860 CENTER DR STE 240
  LA MESA, CA 91942
  Effective as of 01-JAN-14
- REDDY, REDDIWANDLA, MD†
  Provider ID: N/A
  5565 GROSSMONT CENTER DR STE 202
  LA MESA, CA 91942
  Effective as of 01-JAN-21
- REDDY, REDDIWANDLA, MD†
  Provider ID: N/A
  8851 CENTER DR STE 304
  LA MESA, CA 91942
  Effective as of 01-DEC-20
- MEHRANPOUR, PAYAM, MD†
  Provider ID: N/A
  8851 CENTER DR STE 405
  LA MESA, CA 91942
  Effective as of 01-JAN-19
- NAGHI, JESSE, MD†
  Provider ID: N/A
  8851 CENTER DR STE 304
  LA MESA, CA 91942
  Effective as of 01-JAN-24
- NAGHI, JESSE, MD†
  Provider ID: N/A
  8851 CENTER DR STE 304
  LA MESA, CA 91942
  Effective as of 01-JUL-22
- NGUYEN, BRYANT, MD†
  Provider ID: N/A
  8851 CENTER DR STE 304
  LA MESA, CA 91942
  Effective as of 01-JAN-21
- REDDY, REDDIWANDLA, MD†
  Provider ID: N/A
  5565 GROSSMONT CENTER DR STE 202
  LA MESA, CA 91942
  Effective as of 01-SEP-22
- TAGHIZADEH, BEHZAD, MD†
  Provider ID: N/A
  8851 CENTER DR STE 405
  LA MESA, CA 91942
  Effective as of 01-SEP-22
- TAGHIZADEH, BEHZAD, MD†
  Provider ID: N/A
  8851 CENTER DR STE 405
  LA MESA, CA 91942
  Effective as of 01-SEP-22
C1. 網絡內提供者清單

専科護理醫師

YELLEN, LAURENCE, MD†
Provider ID: N/A
8851 CENTER DR STE 405
LA MESA, CA 91942
Effective as of 01-SEP-22

FADDA, GEORGE, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

FADDA, GEORGE, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FADDA, GEORGE, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

FADDA, GEORGE, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-AUG-16

FARAVARDEH, ARMAN, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

LEININGER, DANIEL, DO†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-SEP-22

LEININGER, DANIEL, DO†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-SEP-22

LEININGER, DANIEL, DO†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Teleservice
Effective as of 01-SEP-22

MILLER, LUCY, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-SEP-20

MILLER, LUCY, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

MILLER, LUCY, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

MILLER, LUCY, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

MILLER, LUCY, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-APR-15

Your PCP's provider network may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require mental health service providers to obtain Blue Shield's prior authorization before the service can be covered.

To online access mental health service provider list, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

専科護理醫師

SAEED, ODAY, MD
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAR-24

THOMPSON, JOHN, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-MAY-15

THOMPSON, JOHN, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JAN-21

THOMPSON, JOHN, MD†
Provider ID: N/A
8851 CENTER DR STE 505
LA MESA, CA 91942
Effective as of 01-JUL-22

MOHAMMAD, AHMAD SHAH, MD†
Provider ID: N/A
8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-14

MOHAMMAD, AHMAD SHAH, MD†
Provider ID: N/A
8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-21

MOHAMMAD, AHMAD SHAH, MD†
Provider ID: N/A
8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-21

THOMPSON, JOHN, MD†
Provider ID: N/A
8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-21

THOMPSON, JOHN, MD†
Provider ID: N/A
8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-21

OBSTETRICS / GYNECOLOGY

DAVIS, TRACIE, MD†
Provider ID: N/A
8851 CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-APR-21

PAPA, RHETT, DO†
Provider ID: N/A
8851 CENTER DR STE 210
LA MESA, CA 91942
Effective as of 01-APR-21

SHIH, LYNN, OT
Provider ID: N/A
4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23

BERNALES-MENDEZ, DEZARINA, OT
Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-23

BERNALES-MENDEZ, DEZARINA, OT
Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PORTER, EILEEN, OT
Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

PORTER, EILEEN, OT
Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-22

PORTER, EILEEN, OT
Provider ID: N/A
4700 SPRING ST STE 180
LA MESA, CA 91942
 Effective as of 01-NOV-23

NEUROLOGY

MOHAMMAD, AHMAD SHAH, MD†
Provider ID: N/A
8851 CENTER DR STE 307
LA MESA, CA 91942
Effective as of 01-JAN-14

THERAPIST

BERNALES-MENDEZ, DEZARINA, OT
Provider ID: N/A
4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-JAN-23

BERNALES-MENDEZ, DEZARINA, OT
Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-JAN-23

PORTER, EILEEN, OT
Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-AUG-23

SHIH, LYNN, OT
Provider ID: N/A
4700 SPRING ST STE 180
LA MESA, CA 91942
Effective as of 01-NOV-23
C1. 網絡內提供者清單
專科護理醫師

LA MESA, CA 91942
Effective as of 01-DEC-23

SHIH, LYNN, OT
Provider ID: N/A
8388 PARKWAY DR
LA MESA, CA 91942
Effective as of 01-DEC-23

OPHTHALMOLOGY

BINDER, NICHOLAS, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-APR-22

BINDER, NICHOLAS, MD†
Provider ID: N/A
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-SEP-22

BINDER, NICHOLAS, MD†
Provider ID: N/A
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-NOV-23

CARRABY, ARNETT, MD†
Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

CARRABY, ARNETT, MD†
Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

CHANG, TOM, MD
Provider ID: N/A
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-NOV-23

CHANG, TOM, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-MAY-22

CHIU, STEPHAN, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-23

DELENGOCKY, TAYSON, DO†
Provider ID: N/A
7339 EL CAJON BLVD STE K
LA MESA, CA 91942
Effective as of 01-FEB-23
Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JUL-22

DELENGOCKY, TAYSON, DO†
Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

FISH, STEVEN, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-23

FISH, STEVEN, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Effective as of 01-JUN-22

FISH, STEVEN, MD†
Provider ID: N/A
7339 EL CAJON BLVD STE J-K
LA MESA, CA 91942
Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†
Provider ID: N/A
7339 EL CAJON BLVD STE J-K
LA MESA, CA 91942
Effective as of 01-APR-23

GOLLOGLY, HEIDRUN, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 3 BLDG 2
LA MESA, CA 91942
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†
Provider ID: N/A
7339 EL CAJON BLVD STE J-K
LA MESA, CA 91942
Effective as of 01-JUN-22

HAIGHT, BRUCE, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 551
LA MESA, CA 91942
Effective as of 01-JUN-23

HAIGHT, BRUCE, MD†
Provider ID: N/A
7339 EL CAJON BLVD STE J-K
LA MESA, CA 91942
Effective as of 01-MAR-22

HAIGHT, BRUCE, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 551
LA MESA, CA 91942
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD†
Provider ID: N/A
7339 EL CAJON BLVD STE J-K
LA MESA, CA 91942
Effective as of 01-MAR-22

HSU, CHRISTOPHER, MD†
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 2-3
LA MESA, CA 91942
Effective as of 01-SEP-22

HSU, CHRISTOPHER, MD†
Provider ID: N/A
7339 EL CAJON BLVD STE J-K
LA MESA, CA 91942
Effective as of 01-MAR-22

HSU, CHRISTOPHER, MD†
Provider ID: N/A
7339 EL CAJON BLVD STE J-K
LA MESA, CA 91942
Effective as of 01-MAR-22

333
C1. 網絡內提供者清單

專科護理醫師

- **HSU, CHRISTOPHER, MD**
  Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K
    LA MESA, CA 91942
  Effective as of 01-APR-22

- **HUDSON, HENRY, MD**
  Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K
    LA MESA, CA 91942
  Effective as of 01-APR-23

- **HUDSON, HENRY, MD**
  Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K
    LA MESA, CA 91942
  Effective as of 01-MAY-22

- **HUDSON, HENRY, MD**
  Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K
    LA MESA, CA 91942
  Effective as of 01-SEP-22

- **KATZMAN, BARRY, MD**
  Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K
    LA MESA, CA 91942
  Effective as of 01-MAR-22

- **KATZMAN, BARRY, MD**
  Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K
    LA MESA, CA 91942
  Effective as of 01-SEP-22

- **KATZMAN, BARRY, MD**
  Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K
    LA MESA, CA 91942
  Effective as of 01-MAR-22

- **MANI, MAJID, MD**
  Provider ID: N/A
  - 8851 CENTER DR STE 406
    LA MESA, CA 91942
  Effective as of 01-MAY-21

- **MANI, MAJID, MD**
  Provider ID: N/A
  - 8851 CENTER DR STE 406
    LA MESA, CA 91942
  Effective as of 01-MAY-22

- **MANI, NASRIN, MD**
  Provider ID: N/A
  - 8851 CENTER DR STE 406
    LA MESA, CA 91942
  Effective as of 01-SEP-22

- **MCGRaw, JOSEPH, MD**
  Provider ID: N/A
  - 5565 GROSSMONT CENTER DR STE 551
    LA MESA, CA 91942
  Effective as of 01-SEP-22

- **MCGRaw, JOSEPH, MD**
  Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K
    LA MESA, CA 91942
  Effective as of 01-SEP-22

- **MCGRaw, JOSEPH, MD**
  Provider ID: N/A
  - 5565 GROSSMONT CENTER DR BLDG 2 STE 3
    LA MESA, CA 91942
  Effective as of 01-JAN-22

- **MCGRaw, JOSEPH, MD**
  Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K
    LA MESA, CA 91942
  Effective as of 01-SEP-22

- **MORRISON-REYES, JOSHUA, MD**
  Provider ID: N/A
  - 5565 GROSSMONT CENTER DR BLDG 2 STE 3
    LA MESA, CA 91942
  Effective as of 01-SEP-22

- **MORRISON-REYES, JOSHUA, MD**
  Provider ID: N/A
  - 5565 GROSSMONT CENTER DR BLDG 2 STE 3
    LA MESA, CA 91942
  Effective as of 01-SEP-22

- **MORRISON-REYES, JOSHUA, MD**
  Provider ID: N/A
  - 5565 GROSSMONT CENTER DR BLDG 2 STE 3
    LA MESA, CA 91942
  Effective as of 01-SEP-22

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
<table>
<thead>
<tr>
<th>Provider Name</th>
<th>Specialty</th>
<th>Provider ID</th>
<th>Address</th>
<th>Effective Date</th>
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<tbody>
<tr>
<td>MORRISON-REYES, JOSHUA, MD†</td>
<td>Provider ID: N/A</td>
<td></td>
<td>5565 GROSSMONT CENTER DR STE 551 BLDG 3 LA MESA, CA 91942</td>
<td>Effective as of 01-SEP-22</td>
</tr>
<tr>
<td>PAPASTERGIOU, GEORGIOS, MD†</td>
<td>Provider ID: N/A</td>
<td></td>
<td>8851 CENTER DR STE 406 LA MESA, CA 91942</td>
<td>Effective as of 01-AUG-20</td>
</tr>
<tr>
<td>MORRISON-REYES, JOSHUA, MD†</td>
<td>Provider ID: N/A</td>
<td></td>
<td>7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942</td>
<td>Effective as of 01-SEP-22</td>
</tr>
<tr>
<td>NAJAFI, DAVID, MD</td>
<td>Provider ID: N/A</td>
<td></td>
<td>8262 UNIVERSITY AVE LA MESA, CA 91942</td>
<td>Effective as of 01-JAN-23</td>
</tr>
<tr>
<td>PAPASTERGIOU, GEORGIOS, MD†</td>
<td>Provider ID: N/A</td>
<td></td>
<td>7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942</td>
<td>Effective as of 01-SEP-22</td>
</tr>
<tr>
<td>PATEL, SARJAN, MD†</td>
<td>Provider ID: N/A</td>
<td></td>
<td>7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942</td>
<td>Effective as of 01-SEP-22</td>
</tr>
<tr>
<td>PATEL, GITANE, MD†</td>
<td>Provider ID: N/A</td>
<td></td>
<td>7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942</td>
<td>Effective as of 01-SEP-22</td>
</tr>
<tr>
<td>PRABHU, SUJATA, MD†</td>
<td>Provider ID: N/A</td>
<td></td>
<td>5565 GROSSMONT CENTER DR STE 3 BLDG 2 LA MESA, CA 91942</td>
<td>Effective as of 01-APR-22</td>
</tr>
</tbody>
</table>

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
专科護理醫師

Effective as of 01-SEP-22
PRABHU, SUJATA, MD‡
Provider ID: N/A
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-DEC-23

SASSANI, PATRICK, MD
Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

PRABHU, SUJATA, MD‡
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 551
LA MESA, CA 91942
Effective as of 01-MAR-22

SCHER, BARRY, MD‡
Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

SKAF, AYHAM, MD‡
Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

SKAF, AYHAM, MD‡
Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-JAN-21

SKAF, AYHAM, MD‡
Provider ID: N/A
8851 CENTER DR STE 406
LA MESA, CA 91942
Effective as of 01-SEP-22

DEAN, MOENA, OD‡
Provider ID: N/A
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-SEP-22

DEAN, MOENA, OD‡
Provider ID: N/A
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-JAN-24

DYER, SHARON, OD‡
Provider ID: N/A
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-JUL-22

ZABANEH, ALEXANDER, MD‡
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 3
LA MESA, CA 91942
Effective as of 01-JAN-21

OPTOMETRIST

DYER, SHARON, OD‡
Provider ID: N/A
5565 GROSSMONT CENTER DR STE 3
LA MESA, CA 91942
Effective as of 01-SEP-22

DYER, SHARON, OD‡
Provider ID: N/A
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Effective as of 01-MAR-22

OPTOMETRIST
C1. 網絡內提供者清單

**專科護理醫師**

- **CENTRAL DR STE 551**
  - LA MESA, CA 91942
  - Effective as of 01-SEP-22

- **DYER, SHARON, OD†**
  - Provider ID: N/A
  - 5565 GROSMONT CENTER DR STE 551 LA MESA, CA 91942
  - Effective as of 01-SEP-22

- **HAN, SUL KI, OD†**
  - Provider ID: N/A
  - 7339 EL CAJON BLVD STE J/K LA MESA, CA 91942
  - Effective as of 01-DEC-22

- **KHALIL, VADY, OD†**
  - Provider ID: N/A
  - 7339 EL CAJON BLVD STE J-K LA MESA, CA 91942
  - Effective as of 01-NOV-22

- **TONNU, ANH, OD†**
  - Provider ID: N/A
  - 7339 EL CAJON BLVD STE J-K LA MESA, CA 91942
  - Effective as of 01-MAR-22

- **VINH, JOHN, OD†**
  - Provider ID: N/A
  - 5565 GROSMONT CENTER DR STE 551 LA MESA, CA 91942
  - Effective as of 01-SEP-22

- **VINH, JOHN, OD†**
  - Provider ID: N/A
  - 5565 GROSMONT CENTER DR STE 551 LA MESA, CA 91942
  - Effective as of 01-JAN-21

- **ZVANUT, DONALD, OD†**
  - Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942
  - Effective as of 01-SEP-20

- **KHALIL, VADY, OD†**
  - Provider ID: N/A
  - 7339 EL CAJON BLVD STE J-K LA MESA, CA 91942
  - Effective as of 01-MAR-22

- **ZVANUT, DONALD, OD†**
  - Provider ID: N/A
  - 7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942
  - Effective as of 01-AUG-22

**OTOLARYNGOLOGY**

- **BUSINO, ROWLEY, MD†**
  - Provider ID: N/A
  - 5565 GROSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
  - Effective as of 01-JAN-21

- **MOLES, JEREMIAH, MD†**
  - Provider ID: N/A
  - 5565 GROSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
  - Effective as of 01-APR-21

- **MOLES, JEREMIAH, MD†**
  - Provider ID: N/A
  - 5565 GROSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
  - Effective as of 01-JAN-21
C1. 網絡內提供者清單

專科護理醫師

MOLES, JEREMIAH, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Effective as of 01-SEP-22

MOLES, JEREMIAH, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Effective as of 01-NOV-22

MOLES, JEREMIAH, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Effective as of 01-JUL-22

MOLES, JEREMIAH, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Effective as of 01-DEC-15

MOLES, JEREMIAH, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Effective as of 01-APR-21

MOSHTAGHI, OMID, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-24

PITZER, GEOFFREY, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Teleservice
Effective as of 01-APR-21

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5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
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Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Teleservice
Effective as of 01-JAN-21

PITZER, GEOFFREY, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Teleservice
Effective as of 01-APR-21

SAEZ, NEIL, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Teleservice
Effective as of 01-AUG-16

SAEZ, NEIL, MD
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 3 STE 3 LA MESA, CA 91942
Effective as of 01-FEB-24
C1. 網絡內提供者清單

專科護理醫師

SKELETON, SEAN, DO†
Provider ID: N/A
viders: 5565 GROSSMONT CENTER DR BLDG 3 STE 101 LA MESA, CA 91942
Teleservice Effective as of 01-APR-21

PEDIATRICS

SHAHBAZ, MAJID, MD
Provider ID: N/A
viders: 8851 CENTER DR STE 408 LA MESA, CA 91942
Effective as of 01-MAY-18

PHYS MED/ REHAB PAIN MEDICINE

KATZEN, SETH, DO
Provider ID: N/A
viders: 8851 CENTER DR STE 601 LA MESA, CA 91942
Effective as of 01-MAY-23

PHYSICAL MEDICINE / REHABILITATION

KATZEN, SETH, DO
Provider ID: N/A
viders: 8851 CENTER DR STE 601 LA MESA, CA 91942
Effective as of 01-NOV-22

339
### Network Provider List

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To access the provider list online, please visit [blueshieldca.com/fad](http://blueshieldca.com/fad).
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### Registered Physical Therapist

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C1. 網絡內提供者清單

ZACHARIAH, MARCUS, MD
Effective as of 01-MAR-21
Provider ID: N/A
5565 GROSSMONT CENTER DR BLDG 1 STE 210
LA MESA, CA 91942
RICKARDS, ENASS, MD†
Effective as of 01-JAN-21
Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942

HENDERSON, RODNEY, MD
Effective as of 01-JAN-14
Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942
RICKARDS, ENASS, MD†
Effective as of 01-JAN-21
Provider ID: N/A
8851 CENTER DR STE 601
LA MESA, CA 91942

KIMBALL, MICHAEL, MD†
Effective as of 01-MAR-16
Provider ID: N/A
8851 CENTER DR STE 601
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RICKARDS, ENASS, MD†
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KIMBALL, MICHAEL, MD†
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8851 CENTER DR STE 601
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KOUMJIAN, MICHAEL, MD†
Effective as of 01-JUL-23
Provider ID: N/A
5525 GROSSMONT CENTER DR STE 609
LA MESA, CA 91942

KOUMJIAN, MICHAEL, MD†
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Provider ID: N/A
5525 GROSSMONT CENTER DR STE 609
LA MESA, CA 91942

Surgery Orthopedic

TAYYAB, NEIL, MD
Effective as of 01-AUG-23
Provider ID: N/A
8851 CENTER DR STE 501
LA MESA, CA 91942

JAVIER DESLOGES, JUAN, MD†
Effective as of 01-DEC-22
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8851 CENTER DR STE 501
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KOUMJIAN, MICHAEL, MD†
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5525 GROSSMONT CENTER DR STE 609
LA MESA, CA 91942

SURGERY THORACIC

JAVIER DESLOGES, JUAN, MD†
Effective as of 01-DEC-22
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UROLOGY

BUTLER, PHILIP, MD
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COHEN, EDWARD, MD
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JUMA, SAAD, MD
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<td>N/A</td>
<td>8851 CENTER DR STE 501</td>
<td>01-JAN-21</td>
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<td>VAPNEK, EVAN, MD</td>
<td>Specialist Health</td>
<td>N/A</td>
<td>8851 CENTER DR STE 501</td>
<td>01-JAN-21</td>
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<td>NEUSTEIN, PAUL, MD</td>
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<td>8851 CENTER DR STE 501</td>
<td>01-JAN-24</td>
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<td>NGUYEN, HUY, MD</td>
<td>Specialist Health</td>
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<td>8851 CENTER DR STE 501</td>
<td>01-JAN-24</td>
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<td>Specialist Health</td>
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<td>Specialist Health</td>
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<td>8851 CENTER DR STE 501</td>
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</table>

Your PCP's doctor group may have network psychiatrists. Please refer to the list below. You can directly contact these providers. Please note, some services may require psychiatric providers to obtain Blue Shield prior authorization before they can be covered.

To obtain the list of mental health providers online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單
專科護理醫師

- **600 CORPORATE DR STE 100**  
  LADERA RANCH, CA 92694  
  Effective as of 01-MAY-22

**LANDER, JEFFREY, MD†**  
Provider ID: N/A  
- **600 CORPORATE DR STE 100**  
  LADERA RANCH, CA 92694  
  Effective as of 01-MAY-22

**BINGHAM, LUCAS, MD**  
Provider ID: N/A  
- **600 CORPORATE DR STE 100**  
  LADERA RANCH, CA 92694  
  Effective as of 01-DEC-18

**BINGHAM, LUCAS, MD**  
Provider ID: N/A  
- **600 CORPORATE DR STE 100**  
  LADERA RANCH, CA 92694  
  Effective as of 01-MAY-20

**LANDER, JEFFREY, MD†**  
Provider ID: N/A  
- **600 CORPORATE DR STE 100**  
  LADERA RANCH, CA 92694  
  Effective as of 01-MAY-22

**BINGHAM, LUCAS, MD**  
Provider ID: N/A  
- **600 CORPORATE DR STE 100**  
  LADERA RANCH, CA 92694  
  Effective as of 01-MAY-20

**LANDER, JEFFREY, MD†**  
Provider ID: N/A  
- **600 CORPORATE DR STE 100**  
  LADERA RANCH, CA 92694  
  Effective as of 01-MAY-22

**PETERS, SAMUEL, MD†**  
Provider ID: N/A  
- **600 CORPORATE DR STE 100**  
  LADERA RANCH, CA 92694  
  Effective as of 01-DEC-18

**INTERVENTIONAL CARDIOLOGY**

**NGUYEN, HUY, MD†**  
Provider ID: N/A  
- **333 CORPORATE DR STE 102**  
  LADERA RANCH, CA 92694  
  Effective as of 01-MAY-20

**NGUYEN, HUY, MD†**  
Provider ID: N/A  
- **333 CORPORATE DR STE 102**  
  LADERA RANCH, CA 92694  
  Effective as of 01-DEC-17

**WERTMAN, BRETT, MD**  
Provider ID: N/A  
- **333 CORPORATE DR STE 100**  
  LADERA RANCH, CA 92694  
  Effective as of 01-JAN-16

**NEUROLOGY**

**PENG, YING, MD†**  
Provider ID: N/A  
- **333 CORPORATE DR STE 110**  
  LADERA RANCH, CA 92694  
  Effective as of 01-SEP-18
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<td>Peng, Ying, MD</td>
<td>N/A</td>
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<td>01-JUN-22</td>
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<td>Pediatrics</td>
<td>Dwinell, Lauren, MD</td>
<td>N/A</td>
<td>777 Corporate Dr Ste 250</td>
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<td>Physicians Assistant</td>
<td>Rummel, Laura, PA</td>
<td>N/A</td>
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<td>01-DEC-22</td>
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<td>Podiatrist</td>
<td>Rodriguez, Nitza, DPM</td>
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<td>01-NOV-19</td>
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<tr>
<td>Psychiatry</td>
<td>Borecky, Adam, MD</td>
<td>N/A</td>
<td>333 Corporate Dr Ste 260</td>
<td>01-SEP-19</td>
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260
LADERA RANCH, CA 92694
Effective as of 01-JAN-24

KINBACK, KEVIN, MD
Provider ID: N/A
333 CORPORATE DR STE 260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD
Provider ID: N/A
333 CORPORATE DR STE 260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

KINBACK, KEVIN, MD
Provider ID: N/A
333 CORPORATE DR STE 260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

LAW, LINDSEY, MD
Provider ID: N/A
333 CORPORATE DR STE 260
LADERA RANCH, CA 92694
Effective as of 01-JAN-19

PSYCHOLOGIST

OKONSKI, MICHELE, PSYD
Provider ID: N/A
333 CORPORATE DR STE 260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD
Provider ID: N/A
333 CORPORATE DR STE 260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

OKONSKI, MICHELE, PSYD
Provider ID: N/A
333 CORPORATE DR STE 260
LADERA RANCH, CA 92694
Effective as of 01-JUN-19

SURGERY GENERAL

QURESHI, ALI, MD
Provider ID: N/A
800 CORPORATE DR STE 280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

QURESHI, ALI, MD
Provider ID: N/A
800 CORPORATE DR STE 280
LADERA RANCH, CA 92694
Effective as of 01-FEB-24

SURGERY PLASTIC

DOEZIE, ALLEN, MD
Provider ID: N/A
777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

DOEZIE, ALLEN, MD
Provider ID: N/A
777 CORPORATE DR STE 110
LADERA RANCH, CA 92694
Effective as of 01-SEP-10

CERTIFIED NURSE PRACTITIONER

BINAVI, HOWNAZ, NP
Provider ID: N/A
30201 GOLDEN LANTERN STE B
LAGUNA BEACH, CA 92677
Effective as of 01-JUL-21

DERMATOLOGY

AWADALLA, FARAH, MD
Provider ID: N/A
31852 COAST HWY STE 300
C1. 網絡內提供者清單

**FAMILY PRACTICE**

SANGUEDOLCE, JOHN, MD†
Provider ID: N/A
333 THALIA ST
LAGUNA BEACH, CA 92651
Effective as of 01-FEB-21

**HEMATOLOGY / ONCOLOGY**

VU, COLLIN, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 320
LAGUNA BEACH, CA 92653
Effective as of 01-JAN-18

**INFECTIOUS DISEASE**

HAMIDI ASL, KAMRAN, MD
Provider ID: N/A
31852 COAST HWY STE 302
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

**OPHTHALMOLOGY**

HENRICK, ANDREW, MD
Provider ID: N/A
31852 COAST HWY STE 101
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

**PULMONOLOGY**

REDA, ZACHARIA, MD†
Provider ID: N/A
31862 COAST HWY STE 203
LAGUNA BEACH, CA 92651
Effective as of 01-JUN-22

**PODIATRIST**

YETTER, MARCUS, DPM†
Provider ID: N/A
31852 COAST HWY STE 105
LAGUNA BEACH, CA 92651
Effective as of 01-MAR-20

**PEDIATRIC CRITICAL CARE MEDICINE**

REDA, ZACHARIA, MD†
Provider ID: N/A
31852 COAST HWY STE 102
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23

**PULMONARY DISEASES**

SHAHINIAN, GEORGE, MD†
Provider ID: N/A
31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-23
C1. 網絡內提供者清單

網絡內提供者清單

專科護理醫師

LAGUNA BEACH, CA 92651
Effective as of 01-JAN-15

SHAHINIAN, GEORGE, MD†
Provider ID: N/A
31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-23

SHAHINIAN, GEORGE, MD†
Provider ID: N/A
31852 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JUL-23

SURGERY GENERAL

CHANG, STEVEN, MD
Provider ID: N/A
31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-DEC-11

CHANG, STEVEN, MD
Provider ID: N/A
31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-APR-12

CHANG, STEVEN, MD
Provider ID: N/A
31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

CHANG, STEVEN, MD
Provider ID: N/A
31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-13

COCCIA, MICHAEL, MD
Provider ID: N/A
31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

COCCIA, MICHAEL, MD
Provider ID: N/A
31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

COCCIA, MICHAEL, MD
Provider ID: N/A
31862 COAST HWY STE 201
LAGUNA BEACH, CA 92651
Effective as of 01-APR-12

SURGERY ORTHOPEDIC

ABDOLLAHI, KARIM, MD
Provider ID: N/A
31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

ABDOLLAHI, KARIM, MD
Provider ID: N/A
31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-SEP-10

ABDOLLAHI, KARIM, MD
Provider ID: N/A
31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-APR-16

GILLMAN, MICHAEL, MD
Provider ID: N/A
31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

GILLMAN, MICHAEL, MD
Provider ID: N/A
31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-13

GILLMAN, MICHAEL, MD
Provider ID: N/A
31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-NOV-14

GILLMAN, MICHAEL, MD
Provider ID: N/A
31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-JAN-18

ALLERGY IMMUNOLOGY

LIAO, OTTO, MD†
Provider ID: N/A
25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†
Provider ID: N/A
25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

ASHKENAZE, DAVID, MD†
Provider ID: N/A
31862 COAST HWY STE 400
LAGUNA BEACH, CA 92651
Effective as of 01-OCT-13
C1. 網絡內提供者清單

専科護理醫師

LIAO, OTTO, MD†
Provider ID: N/A
25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-20

LIAO, OTTO, MD†
Provider ID: N/A
25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LIAO, OTTO, MD†
Provider ID: N/A
25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-21

LIAO, OTTO, MD†
Provider ID: N/A
25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-17

LIAO, OTTO, MD†
Provider ID: N/A
25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

LIAO, OTTO, MD†
Provider ID: N/A
25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

LIAO, OTTO, MD†
Provider ID: N/A
25401 CABOT RD STE 101
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

ANESTHESIOLOGY

ALIKHANI, SHAHRIAR, MD†
Provider ID: N/A
23025 MILL CREEK DR
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-20

ALIKHANI, SHAHRIAR, MD²
Provider ID: N/A
23025 MILL CREEK DR
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

ANESTHESIOLOGY PAIN MANAGEMENT

ALSHARIF, KAIS, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

ALSHARIF, KAIS, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-18

ALSHARIF, KAIS, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA
STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

GERAYLI, AFSHIN, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA
STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

GERAYLI, AFSHIN, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA
STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

GERAYLI, AFSHIN, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA
STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-18

HO, ALAN, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA
STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-18

HO, ALAN, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA
STE 7A
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

HO, ALAN, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供
者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
### 專科護理醫師

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<th>医师姓名</th>
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<td>GERAYLI, AFSHIN, MD†</td>
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<td>01-JAN-23</td>
<td>24953 PASEO DE VALENCIA STE 5A LAGUNA HILLS, CA 92653</td>
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<td>HARRIS, MATTHEW, MD†</td>
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<td>01-MAR-24</td>
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<td>HARRIS, MATTHEW, MD†</td>
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<td>HO, ALAN, MD†</td>
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<td>KUO, DENNIS, MD†</td>
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<td>01-MAY-21</td>
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<td>KUO, DENNIS, MD†</td>
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<td>24012 CALLE DE LA PLATA STE 120 LAGUNA HILLS, CA 92653</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

KUO, DENNIS, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-21

KUO, DENNIS, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-19

MESSIHA, ANDREW, MD†
Provider ID: N/A
23521 PASEO DE VALENCIA
STE 204
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

MOUSAVI, SHAHRAYAR, MD
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

MOUSAVI, SHAHRAYAR, MD
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

MOUSAVI, SHAHRAYAR, MD
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MOUSAVI, SHAHRAYAR, MD
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

MOUSAVI, SHAHRAYAR, MD
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

POURADIB, AMIR, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-16

POURADIB, AMIR, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA
STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

MOUSAVI, SHAHRAYAR, MD
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

AUDIOLIGST

NIAVARANY, PIRAYEH, AuD

SHAHBAZIAN, MICHAEL, MD†
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22

SHAHBAZIAN, MICHAEL, MD†
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 5A
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-22
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD
Provider ID: N/A
24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

PANEK, KRISTI, AuD
Provider ID: N/A
24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

PANEK, KRISTI, AuD
Provider ID: N/A
24411 HEALTH CENTER DR
STE 370
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDIAC
ELECTROPHYSIOLOGY

DRURY, PAUL, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

DRURY, PAUL, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

GUJRAL, INDERPAL, MD†
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-23

ARD, SCOTT, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

GUJRAL, INDERPAL, MD†
Provider ID: N/A
24953 PASEO DE
VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

SARCON, ANNAHITA, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

SARCON, ANNAHITA, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

CARDIOVASCULAR
DISEASE

ARD, SCOTT, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

ARD, SCOTT, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

ARD, SCOTT, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

ARD, SCOTT, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

ARD, SCOTT, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

BHADURANI, JOHN, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

CHEN, CHENG-HAN, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

Teleservice
Effective as of 01-SEP-23

Teleservice
Effective as of 01-JAN-24

Teleservice
Effective as of 01-JAN-24

Teleservice
C1. 網絡內提供者清單
專科護理醫師

STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

CHEN, CHENG-HAN, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

DRURY, PAUL, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

DRURY, PAUL, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-19

FEINER, JEFFREY, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

GIM, RONALD, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-12

GUJRAL, INDERPAL, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KONUGRES, GEORGE, DO†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KONUGRES, GEORGE, DO†
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Effective as of 01-JAN-17

KONUGRES, GEORGE, DO†
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Effective as of 01-JAN-23

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Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23
C1. 網絡內提供者清單
專科護理醫師

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<th>Effective as of</th>
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<td>LYLE, DOUGLAS, MD†</td>
<td>N/A</td>
<td>24411 HEALTH CENTER DR STE 550 LAGUNA HILLS, CA 92653</td>
<td>01-JAN-23</td>
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<td>PARISE, CHARLES, MD†</td>
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<td>VAN, HO HAI, MD†</td>
<td>N/A</td>
<td>24022 CALLE DE LA PLATA STE 500 LAGUNA HILLS, CA 92653</td>
<td>01-SEP-23</td>
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<tr>
<td>VAN, HO HAI, MD†</td>
<td>N/A</td>
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<tr>
<td>VAN, HO HAI, MD†</td>
<td>N/A</td>
<td>24022 CALLE DE LA PLATA STE 500 LAGUNA HILLS, CA 92653</td>
<td>01-SEP-23</td>
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<tr>
<td>ZAREMBA, MARK, MD†</td>
<td>N/A</td>
<td>25401 CABOT RD STE 107 LAGUNA HILLS, CA 92653</td>
<td>01-DEC-14</td>
</tr>
<tr>
<td>ZAREMBA, MARK, MD†</td>
<td>N/A</td>
<td>25401 CABOT RD STE 107 LAGUNA HILLS, CA 92653</td>
<td>01-DEC-14</td>
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</tbody>
</table>
C1. 網絡內提供者清單

### 專科護理醫師

<table>
<thead>
<tr>
<th>Provider ID: N/A</th>
<th>Address: 25401 CABOT RD STE 107 LAGUNA HILLS, CA 92653</th>
<th>Effective as of 01-NOV-14</th>
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</thead>
<tbody>
<tr>
<td>ZAREMBA, MARK, MD†</td>
<td>Address: 25401 CABOT RD STE 107 LAGUNA HILLS, CA 92653</td>
<td>Effective as of 01-JAN-13</td>
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</table>

### CERTIFIED ACUPUNCTURIST

<table>
<thead>
<tr>
<th>Provider ID: N/A</th>
<th>Address: 24422 AVENIDA DE LA CARLOTA STE 105 LAGUNA HILLS, CA 92653</th>
<th>Effective as of 01-DEC-23</th>
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<tbody>
<tr>
<td>OMIDI, SHOHREH, LAC</td>
<td>Address: 24422 AVENIDA DE LA CARLOTA STE 105 LAGUNA HILLS, CA 92653</td>
<td>Effective as of 01-DEC-23</td>
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### CERTIFIED NURSE PRACTITIONER

<table>
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<tr>
<th>Provider ID: N/A</th>
<th>Address: 23121 PLAZA POINTE DR STE 107 LAGUNA HILLS, CA 92653</th>
<th>Effective as of 01-APR-23</th>
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</thead>
<tbody>
<tr>
<td>NGUYEN, MARICEL, NP</td>
<td>Address: 23181 VERDUGO DR STE 103A LAGUNA HILLS, CA 92653</td>
<td>Effective as of 01-APR-23</td>
</tr>
</tbody>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

PARK, SE, NP
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

CERTIFIED REGISTERED NURSE MIDWIFE

GABEL, CHRISTINA, CRNM
Provider ID: N/A
24411 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

GABEL, CHRISTINA, CRNM
Provider ID: N/A
24411 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

GABEL, CHRISTINA, CRNM
Provider ID: N/A
24411 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

MOLINSKI, ALLISON, CRNM
Provider ID: N/A
24411 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

MOLINSKI, ALLISON, CRNM
Provider ID: N/A
24411 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

SAJADI, ALISA, CRNM
Provider ID: N/A
24411 HEALTH CENTER DR STE 620
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

MCHONE, PATRICIA, DC†
Provider ID: N/A
24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

MCHONE, PATRICIA, DC†
Provider ID: N/A
24741 ALICIA PKWY STE D
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

DERMATOLOGY

LANDER, JEFFREY, MD†
Provider ID: N/A
24431 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LANDER, JEFFREY, MD†
Provider ID: N/A
24431 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-19

LANDER, JEFFREY, MD†
Provider ID: N/A
24431 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-23

LANIER, TIMOTHY, DC†
Provider ID: N/A
23412 MOULTON PKWY STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

LANDER, JEFFREY, MD†
Provider ID: N/A
24431 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LANDER, JEFFREY, MD†
Provider ID: N/A
24431 CALLE DE LA LOUISA STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

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24431 CALLE DE LA LOUISA STE 200
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Effective as of 01-MAY-23
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C1. 網絡內提供者清單

開放護理師

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<td>MARKMAN, LISA, MD</td>
<td>23141 MOULTON PKWY STE 102</td>
<td>LAGUNA HILLS, CA 92653</td>
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<td>Effective as of 01-JUL-18</td>
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<td>MARKMAN, LISA, MD</td>
<td>23141 MOULTON PKWY STE 102</td>
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<td>MARKMAN, LISA, MD</td>
<td>23141 MOULTON PKWY STE 102</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
### C1. 網絡內提供者清單

#### 專科護理醫師

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<td>MARKMAN, LISA, MD</td>
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<td>23141 MOULTON PKWY STE 102, LAGUNA HILLS, CA 92653</td>
<td>as of 01-MAR-23</td>
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<td>MEHTA, SHILPA, MD†</td>
<td>N/A</td>
<td>23141 MOULTON PKWY STE 102, LAGUNA HILLS, CA 92653</td>
<td>as of 01-MAR-23</td>
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<td>TRAN, NEIL, MD</td>
<td>N/A</td>
<td>24321 AVENIDA DE LA CARLOTA, LAGUNA HILLS, CA 92653</td>
<td>as of 01-FEB-23</td>
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<td>MEHTA, SHILPA, MD†</td>
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<td>LEISH, BRIAN, MD</td>
<td>N/A</td>
<td>24411 HEALTH CENTER DR STE 460, LAGUNA HILLS, CA 92653</td>
<td>as of 01-JAN-18</td>
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<td>RIZNIS, TENGIS, MD†</td>
<td>N/A</td>
<td>24451 HEALTH CENTER DR</td>
<td>as of 01-JAN-18</td>
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C1. 網絡內提供者清單
專科護理醫師

FAMILY PRACTICE
GERIATRIC MEDICINE
PATEL, NEHAL, MD†
Provider ID: N/A
23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

PATEL, NEHAL, MD†
Provider ID: N/A
23141 VERDUGO DR STE 201
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-20

FEMALE PELVIC MED AND
RECONSTRUCTIVE SURG
MWESIGWA, PATRICIA, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

SHOURESHI, POONE, MD
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

SHOURESHI, POONE, MD
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500
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Effective as of 01-SEP-23

GASTROENTEROLOGY

JALALI, FARID, MD†
Provider ID: N/A
24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

JALALI, FARID, MD†
Provider ID: N/A
24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

JALALI, FARID, MD†
Provider ID: N/A
24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-19

NGO, CATHERINE, MD
Provider ID: N/A
26671 ALISO CREEK RD STE 301
LAGUNA HILLS, CA 92656
Effective as of 01-DEC-22

NGO, CATHERINE, MD
Provider ID: N/A
26671 ALISO CREEK RD STE 301
LAGUNA HILLS, CA 92656
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SHAH, KETAN, MD
Provider ID: N/A
24221 CALLE DE LA LOUISA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

SY, THEODORE, MD†
Provider ID: N/A
26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SY, THEODORE, MD†
Provider ID: N/A
26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SY, THEODORE, MD†
Provider ID: N/A
26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653
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SY, THEODORE, MD†
Provider ID: N/A
26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SY, THEODORE, MD†
Provider ID: N/A
26538 MOULTON PKWY STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21
C1. 網絡內提供者清單

網絡內提供者清單

SY, THEODORE, MD†
Provider ID: N/A
26538 MOULTON PKWY
STE 38E
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-18

GENERAL PRACTICE

SHAW, BRIAN, DO†
Provider ID: N/A
23265 S POINTE DR STE 100
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-15

HEMATOLOGY / ONCOLOGY

CHENG, HOWARD, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-14

CHENG, HOWARD, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-08

CHENG, HOWARD, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA STE 25B
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

HAASSAN, SARAH, MD
Provider ID: N/A
24411 HEALTH CENTER DR STE 320

LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

MALEKIRAD, JACQUELINE, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-22

MALEKIRAD, JACQUELINE, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

POW-ANPONGKUL, PETE, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

POW-ANPONGKUL, PETE, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 420
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-22

POW-ANPONGKUL, PETE, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 420
LAGUNA HILLS, CA 92653
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RAO, AMOL, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 320
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SALIMI-TARI, PEYMAN, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 501
LAGUNA HILLS, CA 92653
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SU, DERRICK, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 501
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-22
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<td>WHITE, ALAN, MD</td>
<td>N/A</td>
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<td>BAE, CHAY, DO</td>
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<td>BAE, CHAY, DO</td>
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<td>ABCEDE, GAIL, MD</td>
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C1. 網絡內提供者清單

專科護理醫師

- BAE, CHAY, DO†
  Provider ID: N/A
  
  26538 MOULTON PKWY
  STE 38E
  LAGUNA HILLS, CA 92653
  Effective as of 01-SEP-22

- BAE, CHAY, DO†
  Provider ID: N/A
  
  26538 MOULTON PKWY
  STE 38E
  LAGUNA HILLS, CA 92653
  Effective as of 01-SEP-22

KOOKOOTSEDES, GAYLE, MD
Provider ID: N/A

- KOOKOOTSEDES, GAYLE, MD
  Provider ID: N/A
  
  25411 CABOT RD STE 109
  LAGUNA HILLS, CA 92653
  Teleservice
  Effective as of 01-FEB-24

- KOOKOOTSEDES, GAYLE, MD
  Provider ID: N/A
  
  25401 CABOT RD STE 101
  LAGUNA HILLS, CA 92653
  Effective as of 01-MAR-23

NGUYEN, AN, DO†
Provider ID: N/A

- NGUYEN, AN, DO†
  Provider ID: N/A
  
  23181 VERDUGO DR STE 103A
  LAGUNA HILLS, CA 92653
  Effective as of 01-JAN-18

POURBABAK, SAM, MD
Provider ID: N/A

- POURBABAK, SAM, MD
  Provider ID: N/A
  
  23141 MOULTON PKWY STE 102
  LAGUNA HILLS, CA 92653
  Teleservice
  Effective as of 01-JAN-23

SOONG, YEN-HUI, MD†
Provider ID: N/A

- SOONG, YEN-HUI, MD†
  Provider ID: N/A
  
  23141 MOULTON PKWY STE 108
  LAGUNA HILLS, CA 92653
  Effective as of 01-NOV-22

CHEN, CHENG-HAN, MD†
Provider ID: N/A

- CHEN, CHENG-HAN, MD†
  Provider ID: N/A
  
  24022 CALLE DE LA PLATA
  STE 500
  LAGUNA HILLS, CA 92653
  Effective as of 01-NOV-23

CRITICAL CARE MEDICINE

KADIFA, FADY, MD†
Provider ID: N/A

- KADIFA, FADY, MD†
  Provider ID: N/A
  
  24411 HEALTH CENTER DR
  STE 560
  LAGUNA HILLS, CA 92653
  Effective as of 01-OCT-23

INTERVENTIONAL CARDIOLOGY

ALLAM, SHAMILI, MD
Provider ID: N/A

- ALLAM, SHAMILI, MD
  Provider ID: N/A
  
  24022 CALLE DE LA PLATA
  STE 500
  LAGUNA HILLS, CA 92653
  Effective as of 01-NOV-23

ALLAM, SHAMILI, MD
Provider ID: N/A

- ALLAM, SHAMILI, MD
  Provider ID: N/A
  
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  STE 500
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  Effective as of 01-NOV-23

CHEN, CHENG-HAN, MD†
Provider ID: N/A

- CHEN, CHENG-HAN, MD†
  Provider ID: N/A
  
  24022 CALLE DE LA PLATA
  STE 500
  LAGUNA HILLS, CA 92653
  Effective as of 01-NOV-23

INTERNAL MEDICINE
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-FEB-23

CHEN, CHENG-HAN, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

CHEN, CHENG-HAN, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
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CHEN, CHENG-HAN, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

Effective as of 01-FEB-23

DRURY, PAUL, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

DRURY, PAUL, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

DRURY, PAUL, MD†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-20

Effective as of 01-OCT-22

GUJRAL, INDERPAL, MD†
Provider ID: N/A
24953 PASEO DE VALENCIA STE 30A
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-11

KAROWNI, WASSEF, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-23

KONUGRES, GEORGE, DO†
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

LAMONT, DANIEL, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

LYLE, DOUGLAS, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

MASTERS, ROBERT, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 550
LAGUNA HILLS, CA 92653
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<td>PATEL, MILAN, MD</td>
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<td>TURIY, YULIYA, MD</td>
<td>N/A</td>
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<td>VAN, HO HAI, MD</td>
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<td>WALTERS, DANIEL, MD</td>
<td>N/A</td>
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<td>01-NOV-23</td>
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C1. 網絡內提供者清單

專科護理醫師

WALTERS, DANIEL, MD
Provider ID: N/A

MOORE, CANDACE, MFT
Provider ID: N/A

MACIEL, MARLA, LCSW
Provider ID: N/A

ZARGARBASHI, STEFANIE, LCSW
Provider ID: N/A

WALTERS, DANIEL, MD
Provider ID: N/A

MOORE, CANDACE, MFT
Provider ID: N/A

LICENSED CLINICAL SOCIAL WORKER

DOWNS, SAIGE, LCSW
Provider ID: N/A

MARRIAGE FAMILY THERAPIST

MOORE, CANDACE, MFT
Provider ID: N/A

MATERNAL AND FETAL MEDICINE

BUSH, MELISSA, MD
Provider ID: N/A

BUSH, MELISSA, MD
Provider ID: N/A

BUSH, MELISSA, MD
Provider ID: N/A

BUSH, MELISSA, MD
Provider ID: N/A

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<td>BUSH, MELISSA, MD†</td>
<td>24411 HEALTH CENTER DR STE 260, LAGUNA HILLS, CA 92653</td>
<td>01-JAN-23</td>
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<tr>
<td>BUSH, MELISSA, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-MAY-24</td>
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<td>BUSH, MELISSA, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-OCT-23</td>
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<tr>
<td>CHAU, CINDY, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-JAN-23</td>
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<td>CHAU, CINDY, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
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<tr>
<td>CHAU, CINDY, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-JAN-23</td>
</tr>
<tr>
<td>CHAU, CINDY, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-OCT-19</td>
</tr>
<tr>
<td>CHAU, CINDY, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-JUN-19</td>
</tr>
<tr>
<td>CHAU, CINDY, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-MAY-19</td>
</tr>
<tr>
<td>DAY, ROBERT, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-FEB-23</td>
</tr>
<tr>
<td>MASAKI, DAMON, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-DEC-19</td>
</tr>
<tr>
<td>MASAKI, DAMON, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-MAY-19</td>
</tr>
<tr>
<td>MILLS, MARLIN, MD†</td>
<td>24411 HEALTH CENTER DR STE 300, LAGUNA HILLS, CA 92653</td>
<td>01-MAY-22</td>
</tr>
<tr>
<td>MILLS, MARLIN, MD†</td>
<td>24411 HEALTH CENTER DR STE 540, LAGUNA HILLS, CA 92653</td>
<td>01-FEB-23</td>
</tr>
</tbody>
</table>

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

MILLS, MARLIN, MD†
Provider ID: N/A

24411 HEALTH CENTER DR
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LAGUNA HILLS, CA 92653
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MILLS, MARLIN, MD†
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SHRIVASTAVA, VINEET, MD†
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SHRIVASTAVA, VINEET, MD†
Provider ID: N/A

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MEDICAL ONCOLOGY

VU, COLLIN, MD†
Provider ID: N/A

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NEUROLOGY

BANDARI, DANIEL, MD†
Provider ID: N/A

24012 CALLE DE LA PLATA
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LAGUNA HILLS, CA 92653
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CHOAN, CAROLINE, MD
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24012 CALLE DE LA PLATA
STE 150
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Effective as of 01-OCT-22

LOC, KIET, MD†
Provider ID: N/A

24012 CALLE DE LA PLATA
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LOC, KIET, MD†
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LOC, KIET, MD†
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MAASUMI, KASRA, MD†
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MAASUMI, KASRA, MD†
C1. 網絡內提供者清單

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MAASUMI, KASRA, MD †
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MAASUMI, KASRA, MD †
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MAASUMI, KASRA, MD †
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RAPOPORT, ZHANNA, MD
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CHUNG, LINDA, MD †
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CHUNG, LINDA, MD †
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COUGH, HEIDI, MD
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370
C1. 網絡內提供者清單

專科護理醫師

**COUGH, HEIDI, MD**
Provider ID: N/A
- 24411 HEALTH CENTER DR STE 200
  LAGUNA HILLS, CA 92653
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**COUGH, HEIDI, MD**
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**DAVIS, STEPHANIE, MD**
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**DAVIS, STEPHANIE, MD**
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**DAY, ROBERT, MD**
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**DEJBAKHSH, SHEILA, MD**
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**FREDERICK, JANE, MD**
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**FREDERICK, JANE, MD**
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**JOHNSON, SUSAN, MD**
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**KONG, GRACE, MD**
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**KONG, GRACE, MD**
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  LAGUNA HILLS, CA 92653
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**KONG, GRACE, MD**
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**KRYCHMAN, MICHAEL, MD**
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  LAGUNA HILLS, CA 92653
Effective as of 01-FEB-24

**KRYCHMAN, MICHAEL, MD**
Provider ID: N/A
- 24411 HEALTH CENTER DR STE 620
  LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

**KRYCHMAN, MICHAEL, MD**
Provider ID: N/A
- 24411 HEALTH CENTER DR STE 620
  LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

**KRYCHMAN, MICHAEL, MD**
Provider ID: N/A
- 24411 HEALTH CENTER DR STE 620
  LAGUNA HILLS, CA 92653
Effective as of 01-MAR-24

**LAM, KIM, MD**
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- 24411 HEALTH CENTER DR STE 200
  LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

**LAM, KIM, MD**
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- 24411 HEALTH CENTER DR STE 200
  LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23
### C1. 網絡內提供者清單

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<td>LEE, KATHERINE, MD</td>
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<td>LOPEZ, RACHAEL, MD</td>
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<td>MENDELSOHN, SUSAN, MD</td>
<td>Provider ID: N/A</td>
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<td>MILLER, JAMIE, MD</td>
<td>Provider ID: N/A</td>
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<td>O TOOLE, MARY, MD</td>
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<td>PATEL, MITA, MD</td>
<td>Provider ID: N/A</td>
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<tr>
<td>PETERS, AMY, DO</td>
<td>Provider ID: N/A</td>
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C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-FEB-20

PETERS, AMY, DO
Provider ID: N/A
24411 HEALTH CENTER DR STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23

PRIESTLEY, ANGELIKA, MD
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Effective as of 01-JAN-18

STERNFELD, DANIEL, MD†
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Effective as of 01-APR-11

STERNFELD, DANIEL, MD†
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24411 HEALTH CENTER DR STE 640
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Effective as of 01-OCT-19

STERNFELD, DANIEL, MD†
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24411 HEALTH CENTER DR STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

STERNFELD, DANIEL, MD†
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24411 HEALTH CENTER DR STE 640
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Effective as of 01-SEP-20

TANAMAI, VAYA, MD†
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TANAMAI, VAYA, MD†
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24411 HEALTH CENTER DR STE 640
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TANAMAI, VAYA, MD†
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TANAMAI, VAYA, MD†
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24411 HEALTH CENTER DR STE 640
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Effective as of 01-OCT-19

TANAMAI, VAYA, MD†
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24411 HEALTH CENTER DR STE 640
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Effective as of 01-JAN-21

TANAMAI, VAYA, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 640
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Effective as of 01-JAN-21

TANAMAI, VAYA, MD†
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TANAMAI, VAYA, MD†
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24411 HEALTH CENTER DR STE 640
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†
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LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TANAMAI, VAYA, MD†
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24411 HEALTH CENTER DR STE 640
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Effective as of 01-MAY-20
C1. 網絡內提供者清單

**OPHTHALMOLOGY**

**AHMAD, ASHRAF, MD**
Provider ID: N/A
- 23961 CALLE DE LA MAGDALENA STE 300
  LAGUNA HILLS, CA 92653
  Effective as of 01-OCT-23

**AHMAD, ASHRAF, MD**
Provider ID: N/A
- 23961 CALLE DE LA MAGDALENA STE 300
  LAGUNA HILLS, CA 92653
  Effective as of 01-SEP-23

**AHMAD, ASHRAF, MD**
Provider ID: N/A
- 23961 CALLE DE LA MAGDALENA STE 300
  LAGUNA HILLS, CA 92653
  Effective as of 01-SEP-22

**BANUELOS, LYDIA, MD**
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  LAGUNA HILLS, CA 92653
  Effective as of 01-APR-22

**BANUELOS, LYDIA, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA STE 309
  LAGUNA HILLS, CA 92653
  Effective as of 01-DEC-22

**BROOKMAN, MYLES, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA 309
  LAGUNA HILLS, CA 92653
  Effective as of 01-APR-13

**CHEN, SANFORD, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA 309
  LAGUNA HILLS, CA 92653
  Effective as of 01-APR-23

**CHOI, DAVID, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA STE 305
  LAGUNA HILLS, CA 92653
  Effective as of 01-OCT-23

**CHOI, DAVID, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA STE 305
  LAGUNA HILLS, CA 92653
  Effective as of 01-SEP-22

**CHOI, DAVID, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA 309
  LAGUNA HILLS, CA 92653
  Effective as of 01-SEP-18

**CHOI, DAVID, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA STE 207
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**EIFRIG, CHARLES WILLIAM, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA STE 305
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**EIFRIG, CHARLES WILLIAM, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA STE 305
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  Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA STE 305
  LAGUNA HILLS, CA 92653
  Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM, MD**
Provider ID: N/A
- 23521 PASEO DE VALENCIA STE 305
  LAGUNA HILLS, CA 92653
  Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM, MD**
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- 23521 PASEO DE VALENCIA STE 305
  LAGUNA HILLS, CA 92653
  Effective as of 01-OCT-23

**EIFRIG, CHARLES WILLIAM, MD**
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- 23521 PASEO DE VALENCIA STE 305
  LAGUNA HILLS, CA 92653
  Effective as of 01-OCT-23
### C1. 網絡內提供者清單

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<th>Name</th>
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<tbody>
<tr>
<td>EIFRIG, CHARLES WILLIAM, MD†</td>
<td>N/A</td>
<td>23521 PASEO DE VALENCIA STE 207</td>
<td>01-SEP-18, 01-SEP-22, 01-OCT-23, 01-OCT-20, 01-DEC-20</td>
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<tr>
<td>GUJRAL, SATVINDER, MD†</td>
<td>N/A</td>
<td>23961 CALLE DE LA MAGDALENA STE 300</td>
<td>01-JAN-20, 01-OCT-20, 01-NOV-20, 01-NOV-20, 01-MAR-23</td>
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<tr>
<td>HENRICK, ANDREW, MD</td>
<td>N/A</td>
<td>24022 CALLE DE LA PLATA STE 305</td>
<td>01-JAN-23, 01-JAN-22, 01-FEB-14, 01-NOV-20</td>
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</tbody>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
専科護理醫師

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<th>Name</th>
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<th>Address</th>
<th>Effective as of</th>
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<td>HENRICK, ANDREW, MD</td>
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C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-OCT-23

KELLER, CHARLES, MD
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 300
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

KERSTEN, DIANA, MD
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 300
LAGUNA HILLS, CA 92653
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KELLER, CHARLES, MD
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KERSTEN, DIANA, MD
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要线上获取精神健康服务提供者清单，请访问 blueshieldca.com/fad。
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C1. 網絡內提供者清單

**専科護理醫師**

- **GRATTAN, ANNE, OD†**
  Provider ID: N/A
  Address: 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653
  Effective as of 01-JUN-22

- **GRATTAN, ANNE, OD†**
  Provider ID: N/A
  Address: 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653
  Effective as of 01-JUN-22

- **GRATTAN, ANNE, OD†**
  Provider ID: N/A
  Address: 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653
  Effective as of 01-JUN-23

- **HUYNH, ANTHONY, OD†**
  Provider ID: N/A
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  Effective as of 01-OCT-23

- **HUYNH, ANTHONY, OD†**
  Provider ID: N/A
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- **HUYNH, ANTHONY, OD†**
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  Address: 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653
  Effective as of 01-MAY-22

- **HUYNH, ANTHONY, OD†**
  Provider ID: N/A
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  Effective as of 01-MAY-22

- **HUYNH, ANTHONY, OD†**
  Provider ID: N/A
  Address: 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653
  Effective as of 01-OCT-23

- **HUYNH, ANTHONY, OD†**
  Provider ID: N/A
  Address: 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653
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- **HUYNH, ANTHONY, OD†**
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- **LEIGHT, TERRA, OD†**
  Provider ID: N/A
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- **LEIGHT, TERRA, OD†**
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- **LEIGHT, TERRA, OD†**
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  Effective as of 01-NOV-21

- **LEIGHT, TERRA, OD†**
  Provider ID: N/A
  Address: 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653
  Effective as of 01-NOV-21

- **LEIGHT, TERRA, OD†**
  Provider ID: N/A
  Address: 23961 CALLE DE LA MAGDALENA STE 300 LAGUNA HILLS, CA 92653
  Effective as of 01-JAN-23

- **LEIGHT, TERRA, OD†**
  Provider ID: N/A
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- **LEIGHT, TERRA, OD†**
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  Effective as of 01-JAN-18

- **NG, REBECCA, OD**
  Provider ID: N/A
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  Effective as of 01-NOV-21

- **PHAN, MIMI, OD†**
  Provider ID: N/A
  Address: 23521 PASEO DE VALENCIA STE 305 LAGUNA HILLS, CA 92653
  Effective as of 01-MAR-23

- **PLECHOT, ERIQ, OD**
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您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。

如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
### 網路內提供者清單

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<tr>
<td>YIAN, CHRISTOPHER, MD†</td>
<td>24411 HEALTH CENTER DR STE 600 LAGUNA HILLS, CA 92653</td>
<td>01-OCT-23</td>
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C1. 網絡內提供者清單
專科護理醫師

YIAN, CHRISTOPHER, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

YIAN, CHRISTOPHER, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

YIAN, CHRISTOPHER, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-07

YIAN, CHRISTOPHER, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-13

YIAN, CHRISTOPHER, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

YIAN, CHRISTOPHER, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

YIAN, CHRISTOPHER, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-12

YIAN, CHRISTOPHER, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 600
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-18

DENNY-BROWN, SINAN, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

DENNY-BROWN, SINAN, MD
Provider ID: N/A
24022 CALLE DE LA PLATA
STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

PHYS MED/ REHAB PAIN MEDICINE
C1. 網絡內提供者清單

專科護理醫師

HANNA, ANDREW, DO
Provider ID: N/A
24411 HEALTH CENTER DR STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

HANNA, ANDREW, DO
Provider ID: N/A
24411 HEALTH CENTER DR STE 610
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-23

PHYSICAL MEDICINE / REHABILITATION

ALSHARIF, KAIS, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

ALSHARIF, KAIS, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-20

ALSHARIF, KAIS, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

POURADIB, AMIR, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

POURADIB, AMIR, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

POURADIB, AMIR, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

POURADIB, AMIR, MD†
Provider ID: N/A
24012 CALLE DE LA PLATA STE 120
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-22

PHYSICIANS ASSISTANT

BYNON, KRISTEN, PA
Provider ID: N/A
24401 HEALTH CENTER DR STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA
Provider ID: N/A
✈ 24401 HEALTH CENTER DR STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

BYNON, KRISTEN, PA
Provider ID: N/A
✈ 24401 HEALTH CENTER DR STE 200
LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

CARDENAS, RICARDO, PA†
Provider ID: N/A
✈ 23521 PASEO DE VALENCIA STE 250
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARDENAS, RICARDO, PA†
Provider ID: N/A
✈ 23521 PASEO DE VALENCIA STE 250
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-22

CARR, OLIVIA, PA
Provider ID: N/A
✈ 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

CARR, OLIVIA, PA
Provider ID: N/A
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LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

CARR, OLIVIA, PA
Provider ID: N/A
✈ 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-24

DINH, Y NHA THI, PA†
Provider ID: N/A
✈ 23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-15

KIM, MOSES, MD†
Provider ID: N/A
✈ 23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-APR-21

KISCADEN, LAUREN, PA
Provider ID: N/A
✈ 24411 HEALTH CENTER DR STE 208
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

KISCADEN, LAUREN, PA
Provider ID: N/A
✈ 24411 HEALTH CENTER DR STE 208
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

PALMER, VIVIENNE, PA
Provider ID: N/A
✈ 24411 HEALTH CENTER DR STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-APR-23

PALMER, VIVIENNE, PA
Provider ID: N/A
✈ 24411 HEALTH CENTER DR STE 680
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

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Provider ID: N/A
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Effective as of 01-JAN-24

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LAGUNA HILLS, CA 92653
Effective as of 01-JAN-24

PETERMAN, KYLIE, PA
Provider ID: N/A
✈ 23181 VERDUGO DR STE 103A
LAGUNA HILLS, CA 92653
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*Teleservice*

Your PCP’s provider group may have network mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require the mental health service provider to obtain prior authorization from Blue Shield, then the service can be covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
### HEALTH NURSE PRACTITIONER

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<td>CHU, WEIMING, MD‡</td>
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C1. 網絡內提供者清單
專科護理醫師

CHANG, WILLIAM, DO†
Provider ID: N/A
23141 MOULTON PKWY STE 108
LAGUNA HILLS, CA 92653
Effective as of 01-JUN-23

ESPELETA, VIDAL, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 560
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ESPELETA, VIDAL, MD†
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ESPELETA, VIDAL, MD†
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KADIFA, FADY, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 560
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Effective as of 01-OCT-22

KADIFA, FADY, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-17

KADIFA, FADY, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KADIFA, FADY, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

KADIFA, FADY, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653
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KADIFA, FADY, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-19

KADIFA, FADY, MD†
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24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KADIFA, FADY, MD†
Provider ID: N/A
24411 HEALTH CENTER DR STE 560
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

KOHLI, SANJIVAN, MD†
Provider ID: N/A

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C1. 網絡內提供者清單

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<td>KOHLI, SANJIVAN, MD</td>
<td>01-NOV-22</td>
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<td>KOHLI, SANJIVAN, MD</td>
<td>01-JUN-23</td>
<td>23141 MOULTON PKWY STE 108, LAGUNA HILLS, CA 92653</td>
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<td>SHAHINIAN, GEORGE, MD</td>
<td>01-OCT-19</td>
<td>24411 HEALTH CENTER DR STE 620, LAGUNA HILLS, CA 92653</td>
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<td>SINGH, SAMARJIT, MD</td>
<td>01-OCT-22</td>
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<td>SINGH, SAMARJIT, MD</td>
<td>01-OCT-23</td>
<td>24411 HEALTH CENTER DR STE 560, LAGUNA HILLS, CA 92653</td>
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<td>VOVAN, THOMAS, MD</td>
<td>01-OCT-18</td>
<td>24411 HEALTH CENTER DR STE 560, LAGUNA HILLS, CA 92653</td>
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<td>VOVAN, THOMAS, MD</td>
<td>01-OCT-22</td>
<td>24411 HEALTH CENTER DR STE 560, LAGUNA HILLS, CA 92653</td>
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C1. 網絡內提供者清單

專科護理醫師

LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

VOVAN, THOMAS, MD†
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RADIATION ONCOLOGY

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CHAN, LINDA, MD†
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24302 PASEO DE VALENCIA
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Effective as of 01-JAN-23

CHAN, LINDA, MD†
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Effective as of 01-JAN-23

CHAN, LINDA, MD†
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24302 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

CHAN, LINDA, MD†
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KABOLIZADEH, PEYMAN, MD†
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24302 PASEO DE VALENCIA
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RHEUMATOLOGY

KHALEGHI DAMAVANDI, MIR BEHNAS, MD
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25411 CABOT RD STE 112
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KHALEGHI DAMAVANDI, MIR BEHNAS, MD
Provider ID: N/A
25411 CABOT RD STE 112
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Effective as of 01-SEP-15

LEE, SHARON, MD†
Provider ID: N/A
24302 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-AUG-21

LEE, SHARON, MD†
Provider ID: N/A
24302 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†
Provider ID: N/A
24302 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

LEE, SHARON, MD†
Provider ID: N/A
24302 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

LEE, SHARON, MD†
Provider ID: N/A
24302 PASEO DE VALENCIA
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LEE, SHARON, MD†
Provider ID: N/A
24302 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-23

KABOLIZADEH, PEYMAN, MD†
Provider ID: N/A
24302 PASEO DE VALENCIA
LAGUNA HILLS, CA 92653
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<td>SURGERY COLON SURGERY</td>
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C1. 網絡內提供者清單

專科護理醫師

BRADY, MATTHEW, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

BRADY, MATTHEW, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAR-21

SYN, GENE, MD
Provider ID: N/A
23961 CALLE DE LA
MAGDALENA STE 231
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

SYN, GENE, MD
Provider ID: N/A
23961 CALLE DE LA
MAGDALENA STE 417
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-21

SURGERY GENERAL
ABOU ABBASS, AHMAD, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

ASHLEY, BLAKE, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

ASHLEY, BLAKE, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

ASHLEY, BLAKE, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-19

ASHLEY, BLAKE, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BACON, LOUISE, MD
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-23

BACON, LOUISE, MD
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DEARING, DAVID, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
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<td>PHAM, ALEXANDER, MD</td>
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<td>RAHNEMA, CYRUS, MD</td>
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<td>23521 PASEO DE VALENCIA STE 108</td>
<td>01-JAN-24</td>
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<tr>
<td>ROBERTSON, ELsie, MD</td>
<td>24411 HEALTH CENTER DR STE 350</td>
<td>01-MAR-23</td>
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<tr>
<td>RON, KAIS, MD</td>
<td>11 MAREBLL STE 200</td>
<td>01-OCT-23</td>
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<td>SHAHMA, RAH, DO</td>
<td>24411 HEALTH CENTER DR STE 350</td>
<td>01-OCT-23</td>
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<tr>
<td>TENG, WANG, MD</td>
<td>24411 HEALTH CENTER DR STE 350</td>
<td>01-JAN-18</td>
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<td>WALLACE, WILLIAM, MD</td>
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Your PCP's group may have their own network mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require mental health service providers to obtain Blue Shield's prior authorization before the service can be covered.

To get the mental health service provider list online, please visit bluecentralca.com/fad.
Effective as of 01-JAN-20

WALLACE, WILLIAM, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

WALLACE, WILLIAM, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-16

WALLACE, WILLIAM, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-13

WALLACE, WILLIAM, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-APR-11

WALLACE, WILLIAM, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-22

WATANABE, BRIAN, MD†
Provider ID: N/A
24953 PASCO DE VALENCIA
STE 15C
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-NOV-12

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-JUL-20

SURGERY GENERAL

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-MAY-18

DEARING, DAVID, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WONG, JASON, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

DEARING, DAVID, MD†
Provider ID: N/A
24411 HEALTH CENTER DR
STE 350
LAGUNA HILLS, CA 92653
Effective as of 01-SEP-21

WONG, JASON, MD†
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

DEARING, DAVID, MD†
Provider ID: N/A

SHARMA, RAHUL, DO†
Provider ID: N/A

TENG, WANG, MD†
Provider ID: N/A

SHARMA, RAHUL, DO†
Provider ID: N/A

TENG, WANG, MD†
Provider ID: N/A

SHARMA, RAHUL, DO†
Provider ID: N/A

TENG, WANG, MD†
Provider ID: N/A

WALLACE, WILLIAM, MD†
Provider ID: N/A

TENG, WANG, MD†
Provider ID: N/A

WALLACE, WILLIAM, MD†
Provider ID: N/A

SURGERY HAND
ORTHOPEDIC
您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
### C1. 網絡內提供者清單

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<th>Name</th>
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**UROLOGY**

BUI, DON, MD

Provider ID: N/A

**Address:**

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-23
Effective as of 01-FEB-20

CHEVINSKY, MICHAEL, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-MAR-23

ELKHOURY, FUAD, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-21

ELKHOURY, FUAD, MD†
Provider ID: N/A
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Effective as of 01-NOV-21

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Provider ID: N/A
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ELKHOURY, FUAD, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

GRUENENFELDER, JENNIFER, MD
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-NOV-23
C1. 網絡內提供者清單

專科護理醫師

HO, TAMMY, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

HO, TAMMY, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-OCT-23

HO, TAMMY, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-DEC-23

HO, TAMMY, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-22

HO, TAMMY, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

HO, TAMMY, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†
Provider ID: N/A
25200 LA PAZ RD STE 200 LAGUNA HILLS, CA 92653
Effective as of 01-JAN-18

KIM, MOSES, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†
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23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

KIM, MOSES, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

KIM, MOSES, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

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<th>郵遞地址</th>
<th>經濟有效日期</th>
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<td>KIM, MOSES, MD†</td>
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<td>Effective as of 01-JAN-23</td>
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<tr>
<td>LIAUW, JASON, MD</td>
<td>23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653</td>
<td>Effective as of 01-JUL-19</td>
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<tr>
<td>MEAGLIA, JAMES, MD†</td>
<td>23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653</td>
<td>Effective as of 01-JAN-21</td>
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<td>MEAGLIA, JAMES, MD†</td>
<td>23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653</td>
<td>Effective as of 01-OCT-23</td>
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<td>MEAGLIA, JAMES, MD†</td>
<td>23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653</td>
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<td>NAKAMURA, LEAH, MD†</td>
<td>23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653</td>
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<td>NAKAMURA, LEAH, MD†</td>
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<td>NAKAMURA, LEAH, MD†</td>
<td>23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653</td>
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<td>NAKAMURA, LEAH, MD†</td>
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<td>NAKAMURA, LEAH, MD†</td>
<td>23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653</td>
<td>Effective as of 01-OCT-23</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

網絡內提供者清單

專業護理醫師

LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-FEB-20

NAKAMURA, LEAH, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
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Effective as of 01-JAN-21

PASIN, ERIK, MD

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24953 PASEO DE VALENCIA STE 15B
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Effective as of 01-JAN-21

PASIN, ERIK, MD

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24953 PASEO DE VALENCIA STE 15B
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Effective as of 01-APR-24

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE VALENCIA STE 15B
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Effective as of 01-OCT-12

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE VALENCIA STE 15B
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Effective as of 01-FEB-21

PASIN, ERIK, MD

Provider ID: N/A

24953 PASEO DE VALENCIA STE 15B
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Effective as of 01-AUG-23

SHOURESHEI, POONE, MD

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23961 CALLE DE LA MAGDALENA STE 500
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Effective as of 01-AUG-23

SHOURESHEI, POONE, MD

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23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

SHOURESHEI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

SHOURESHEI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

SHOURESHEI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-APR-24

SHOURESHEI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-OCT-12

SHOURESHEI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

SHOURESHEI, POONE, MD

Provider ID: N/A

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23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-AUG-23

SHOURESHEI, POONE, MD

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
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Effective as of 01-NOV-23

SINGH, KARAN, MD†

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23961 CALLE DE LA MAGDALENA STE 500
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Effective as of 01-Jan-23

SINGH, KARAN, MD†

Provider ID: N/A

23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653

Effective as of 01-Jan-23

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<th>23961 CALLE DE LA MAGDALENA STE 500</th>
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<td>Effective as of 01-APR-14</td>
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<tr>
<td>SINGH, KARAN, MD</td>
<td>Provider ID: N/A</td>
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<td>SINGH, KARAN, MD</td>
<td>Provider ID: N/A</td>
<td>25200 LA PAZ RD STE 200</td>
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<td>SINGH, KARAN, MD</td>
<td>Provider ID: N/A</td>
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C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-20

SPITZ, AARON, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-20

SPITZ, AARON, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-21

SPITZ, AARON, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-20

SU, DANIEL, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23

SU, DANIEL, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-23

SU, DANIEL, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-OCT-23

SU, DANIEL, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-20

SU, DANIEL, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500 LAGUNA HILLS, CA 92653 Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†
Provider ID: N/A
25200 LA PAZ RD STE 200 LAGUNA HILLS, CA 92653 Effective as of 01-JAN-18

TEBYANI, NEYSSAN, MD†
Provider ID: N/A
25200 LA PAZ RD STE 200 LAGUNA HILLS, CA 92653 Effective as of 01-MAY-17

409
C1. 網絡內提供者清單
專科護理醫師

TEBYANI, NEYSSAN, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-FEB-20

TEBYANI, NEYSSAN, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500
LAGUNA HILLS, CA 92653
Effective as of 01-JAN-21

TEBYANI, NEYSSAN, MD†
Provider ID: N/A
23961 CALLE DE LA MAGDALENA STE 500
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ALLERGY IMMUNOLOGY

Dyer, Marc, MD
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30131 TOWN CENTER DR STE 120
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Dyer, Marc, MD
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30131 TOWN CENTER DR STE 120
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Effective as of 01-JAN-13

Dyer, Marc, MD
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AUDIOLIST

Abraham, Maria, AuD†
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28985 GOLDEN LANTERN STE B
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Abraham, Maria, AuD†
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28985 GOLDEN LANTERN STE B
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KLEIN, LORRIE, MD†
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30201 GOLDEN LANTERN
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KLEIN, LORRIE, MD†
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KLEIN, LORRIE, MD†
Provider ID: N/A
30201 GOLDEN LANTERN
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LAGUNA NIGUEL, CA 92677
Effective as of 01-SEP-19
C1. 網絡內提供者清單

專科護理醫師

KLEIN, LORRIE, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
  STE B
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-SEP-19

LANDER, JEFFREY, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
  STE B
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-OCT-22

LANDER, JEFFREY, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
  STE B
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-JAN-23

LANDER, JEFFREY, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
  STE B
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-OCT-23

LEDON, JENNIFER, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
  STE B
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-MAY-23

LEDON, JENNIFER, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
  STE B
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-SEP-19

LANDER, JEFFREY, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
  STE B
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-OCT-22

LANDER, JEFFREY, MD†
Provider ID: N/A
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LANDER, JEFFREY, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
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  Effective as of 01-OCT-23

LEDON, JENNIFER, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
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LEDON, JENNIFER, MD†
Provider ID: N/A
- 30201 GOLDEN LANTERN
  STE B
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-SEP-22

PATEL, JYOTINKUMAR, MD†
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- 30281 GOLDEN LANTERN
  LAGUNA NIGUEL, CA 92677
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HEMATOLOGY / ONCOLOGY

WAGNER, EDWARD, MD
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- 25500 RANCHO NIGUEL
  RD STE 240
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-NOV-21

INTERNAL MEDICINE

SHAHIM, ZAHRA, MD
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- 32341 GOLDEN LANTERN
  STE D
  LAGUNA NIGUEL, CA 92677
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MEDICAL ONCOLOGY

WAGNER, EDWARD, MD
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- 25500 RANCHO NIGUEL
  RD STE 240
  LAGUNA NIGUEL, CA 92677
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NEUROLOGY CHILD

GARFINKLE, REBECCA, DO
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- 30131 TOWN CENTER DR
  STE 215
  LAGUNA NIGUEL, CA 92677
  Effective as of 01-NOV-14
C1. 網絡內提供者清單

網絡內提供者清單

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MCINTOSH, ANDREW, MD†
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30100 CROWN VALLEY PKWY STE 17C
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MCINTOSH, ANDREW, MD†
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30131 TOWN CENTER DR STE 195
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ENGELMAN, SUZANNE, PhD
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Effective as of 01-OCT-23

MCINTOSH, ANDREW, MD†
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30131 TOWN CENTER DR STE 195
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Effective as of 01-MAR-15

ENGELMAN, SUZANNE, PhD
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30131 TOWN CENTER DR STE 268
LAGUNA NIGUEL, CA 92677
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MCINTOSH, ANDREW, MD†
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PRZEKLASA AUTH, MELISSA, MD†
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Effective as of 01-SEP-19

ENGELMAN, SUZANNE, PhD
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30100 CROWN VALLEY PKWY STE 17C
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Effective as of 01-OCT-23

PRZEKLASA AUTH, MELISSA, MD†
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30131 TOWN CENTER DR STE 237
LAGUNA NIGUEL, CA 92677
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30100 CROWN VALLEY PKWY STE 17C
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PODIATRIST

ENGELMAN, SUZANNE, PhD
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30100 CROWN VALLEY PKWY STE 17C
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COX, MATTHEW, DPM
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30001 TOWN CENTER DR STE E2
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30100 CROWN VALLEY PKWY STE 17C
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30131 TOWN CENTER DR STE 268
LAGUNA NIGUEL, CA 92677
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GRAHAM, SCOTT, MD†
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24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-FEB-22

FAMILY PRACTICE

SPORTS MEDICINE
C1. 網絡內提供者清單

專科護理醫師

VENEZIANO, CHRISTOPHER, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
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PHYSICIANS ASSISTANT

BOW, LINDA, PA†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-SEP-23

NGUYEN, TONY, PA†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-AUG-22

PODIATRIST

BATHAEE, FARSHAD, DPM
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-JUN-12

BATHAEE, FARSHAD, DPM
Provider ID: N/A
24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-23

ROOHIAN, ARSHIA, DPM
Provider ID: N/A
24331 EL TORO RD STE 370
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-23

REGISTRATION PHYSICAL THERAPIST

FRESHMAN, JANELLE, PT†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-23

MOSKOW, LONNIE, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-23

AMINIAN, ARASH, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-23
C1. 網絡內提供者清單

網絡內提供者清單

AMINIAN, ARASH, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-NOV-14

AMINIAN, ARASH, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-OCT-22

AMINIAN, ARASH, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-SEP-24

AMINIAN, ARASH, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-FEB-24

Effective as of 01-FEB-24

GRAHAM, SCOTT, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA
92637
Effective as of 01-FEB-24

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
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<th>Provider ID: N/A</th>
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<tr>
<td>JOHNSON, BRYCE, MD(^\d)</td>
<td>Provider ID: N/A</td>
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<tr>
<td>KADAKIA, NIMISH, MD(^\d)</td>
<td>Provider ID: N/A</td>
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<tr>
<td>KIM, ABRAHAM, MD(^\d)</td>
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<td>KIM, ABRAHAM, MD(^\d)</td>
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<td>KIM, ABRAHAM, MD(^\d)</td>
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您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。

如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

LAGUNA WOODS, CA 92637
Effective as of 01-SEP-20

KIM, ABRAHAM, MD†
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Effective as of 01-OCT-23

KIM, ABRAHAM, MD†
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Effective as of 01-JAN-23

KIM, ABRAHAM, MD†
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Effective as of 01-DEC-18

KIM, ABRAHAM, MD†
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Effective as of 01-AUG-18

KIM, ABRAHAM, MD†
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Effective as of 01-JUN-23

KIM, ABRAHAM, MD†
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Effective as of 01-JAN-24

KIM, ABRAHAM, MD†
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Effective as of 01-JAN-24

MOLHO, DAVID, MD
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Teleservice
Effective as of 01-JAN-24

MOLHO, DAVID, MD
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Teleservice
Effective as of 01-JAN-24

MOLHO, DAVID, MD
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Teleservice
Effective as of 01-JAN-24

MOLHO, DAVID, MD
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Teleservice
Effective as of 01-APR-24

MOLHO, DAVID, MD
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Teleservice
Effective as of 01-APR-24

MOLHO, DAVID, MD
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Teleservice
Effective as of 01-DEC-23

MOLHO, DAVID, MD
Provider ID: N/A
24331 EL TORO RD STE 200 LAGUNA WOODS, CA 92637
Teleservice
Effective as of 01-JAN-24

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C1. 網絡內提供者清單

專科護理醫師

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

TOCCI, STEPHEN, MD†
Provider ID: N/A
24310 MOULTON PKWY STE 0563
LAGUNA WOODS, CA 92637
Effective as of 01-JUL-12

VENEZIANO, CHRISTOPHER, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-AUG-23

VENEZIANO, CHRISTOPHER, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-DEC-21

VENEZIANO, CHRISTOPHER, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-DEC-21

VENEZIANO, CHRISTOPHER, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-OCT-11

VENEZIANO, CHRISTOPHER, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-DEC-21

WONG, JEFFREY, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-DEC-21

WONG, JEFFREY, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-DEC-21

WONG, JEFFREY, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-DEC-21

WONG, JEFFREY, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-DEC-21

WONG, JEFFREY, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-DEC-21

WONG, JEFFREY, MD†
Provider ID: N/A
24331 EL TORO RD STE 200
LAGUNA WOODS, CA 92637
Effective as of 01-DEC-21

WONG, JEFFREY, MD†
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<td>YOUDERIAN, ARI, MD†</td>
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<td>YOUDERIAN, ARI, MD†</td>
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<td>YOUDERIAN, ARI, MD†</td>
<td>24331 EL TORO RD STE 200</td>
<td>LAUGNA WOODS, CA 92637</td>
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<td>YOUDERIAN, ARI, MD†</td>
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<td>YOUDERIAN, ARI, MD†</td>
<td>24331 EL TORO RD STE 200</td>
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<th>Provider ID: N/A</th>
<th>31571 CANYON ESTATES DR STE 228</th>
<th>LAKE ELSINORE, CA 92532</th>
<th>Effective as of 01-MAY-15</th>
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<td>QASQAS, SHADI, MD†</td>
<td>31571 CANYON ESTATES DR STE 228</td>
<td>LAKE ELSINORE, CA 92532</td>
<td>Effective as of 01-MAY-15</td>
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| Provider ID: N/A | 31736 MISSION TRL STE G | LAKE ELSINORE, CA 92530 | Effective as of 01-OCT-23 |

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<th>Provider ID: N/A</th>
<th>30195 FRASER DR</th>
<th>LAKE ELSINORE, CA 92530</th>
<th>Effective as of 01-FEB-24</th>
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| Provider ID: N/A | 30195 FRASER DR | LAKE ELSINORE, CA 92530 | Effective as of 01-FEB-24 |

Your PCP’s doctor group may have network providers for mental health services. Please refer to the list below. You may directly contact these providers. Please note, some services may require mental health service providers to obtain Blue Shield prior authorization before being covered.

For online access to mental health service provider lists, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

專科護理醫師

<table>
<thead>
<tr>
<th>Doctor</th>
<th>Provider ID</th>
<th>Address</th>
<th>Effective as of</th>
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<tbody>
<tr>
<td>HERNANDEZ, MARCO, DC</td>
<td>N/A</td>
<td>30195 FRASER DR LAKE ELSINORE, CA 92530</td>
<td>01-FEB-24</td>
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<td>JU, NATHANIEL, DC</td>
<td>N/A</td>
<td>30195 FRASER DR LAKE ELSINORE, CA 92530</td>
<td>01-JUL-22</td>
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<tr>
<td>ALTRIKI, MOHAMAD, MD</td>
<td>N/A</td>
<td>425 DIAMOND DR STE 102 LAKE ELSINORE, CA 92530</td>
<td>01-AUG-18</td>
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<tr>
<td>INTERVENTIONAL CARDIOLOGY</td>
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<td>ATTIA, NADER, DO</td>
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<td>31581 CANYON ESTATES DR LAKE ELSINORE, CA 92532</td>
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<td>MESSENGER, BRADLEY, MD</td>
<td>N/A</td>
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<td>PAREKH, NIRAJ, MD</td>
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<td>PATANKAR, KAUSTUBH, MD</td>
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### C1. 網絡內提供者清單  
#### 專科護理醫師

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#### OBSTETRICS / GYNECOLOGY

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C1. 網絡內提供者清單

網絡內提供者清單

C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22
VADAPARAMPIL, JANET, MD
Provider ID: N/A
31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22
VADAPARAMPIL, JANET, MD
Provider ID: N/A
31946 MISSION TRL STE A
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

OPTOMETRIST

GEE, JENNIFER, OD
Provider ID: N/A
30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22
MORA, WENDY, OD
Provider ID: N/A
30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22
RICH, RYAN, OD
Provider ID: N/A
30195 FRASER DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22

REGISTERED PHYSICAL THERAPIST

CASTELLON, SHAWN, PT
Provider ID: N/A
425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22
DUPLECHAN, LAWRENCE, PT
Provider ID: N/A
425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22
EDDOW, JIM, PT
Provider ID: N/A
425 DIAMOND DR
LAKE ELSINORE, CA 92530
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EDDOW, JIM, PT
Provider ID: N/A
425 DIAMOND DR
LAKE ELSINORE, CA 92530
Effective as of 01-JUL-22
C1. 網絡內提供者清單

湖內護理醫師

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C1. 網絡內提供者清單
專科護理醫師

STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BELL, IRA, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BENIK, KAREN, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BENIK, KAREN, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

BENIK, KAREN, MD†
Provider ID: N/A
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BENIK, KAREN, MD†
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Effective as of 01-JUL-22

BENIK, KAREN, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-22

MESHKINPOUR, AZIN, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

MESHKINPOUR, AZIN, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD
STE 220
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

MESHKINPOUR, AZIN, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

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Provider ID: N/A
23832 ROCKFIELD BLVD
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MESHKINPOUR, AZIN, MD†
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LAKE FOREST, CA 92630
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Provider ID: N/A
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LAKE FOREST, CA 92630
Effective as of 01-APR-23

MESHKINPOUR, AZIN, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD
STE 210
LAKE FOREST, CA 92630
Effective as of 01-APR-23

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C1. 網絡內提供者清單

MESHKINPOUR, AZIN, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

MESHKINPOUR, AZIN, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD STE 210
LAKE FOREST, CA 92630
Effective as of 01-DEC-18

TANG, KIM, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD STE 210
LAKE FOREST, CA 92630
Effective as of 01-JUL-21

TANG, KIM, MD†
Provider ID: N/A
23832 ROCKFIELD BLVD STE 210
LAKE FOREST, CA 92630
Effective as of 01-SEP-22

ENDOCRINOLOGY
METABOLISM DIABETES

KRISHNAN, PRIYANKA, MD
Provider ID: N/A
23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-AUG-21

KRISHNAN, PRIYANKA, MD
Provider ID: N/A
23331 EL TORO RD STE 102
LAKE FOREST, CA 92630
Effective as of 01-OCT-23
C1. 網絡內提供者清單
專科護理醫師

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C1. 網絡內提供者清單

專科護理醫師

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如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
専科護理醫師

KANUKUNTLA, TULASI, MD†
Provider ID: N/A
24432 MUIRLANDS BLVD STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†
Provider ID: N/A
24432 MUIRLANDS BLVD STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†
Provider ID: N/A
24432 MUIRLANDS BLVD STE 131
LAKE FOREST, CA 92630
Effective as of 01-OCT-23

RAJPOOT, DEEPAK, MD†
Provider ID: N/A
24432 MUIRLANDS BLVD STE 131
LAKE FOREST, CA 92630
Effective as of 01-DEC-21

KANUKUNTLA, TULASI, MD†
Provider ID: N/A
24432 MUIRLANDS BLVD STE 131
LAKE FOREST, CA 92630
Effective as of 01-MAY-15

KANG, EILEEN, PhD
Provider ID: N/A
13 ORCHARD STE 103
LAKE FOREST, CA 92630
Effective as of 01-MAY-15

REGISTERED PHYSICAL THERAPIST

BECKER GALUSHA, JANE, PT
Provider ID: N/A
22821 LAKE FOREST DR STE 100
LAKE FOREST, CA 92630
Effective as of 01-MAY-20

SPEECH PATHOLOGIST

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
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22672 LAMBERT ST STE 611
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
Provider ID: N/A
22672 LAMBERT ST STE 612
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

PSYCHOLOGIST

KANG, EILEEN, PhD
Provider ID: N/A
13 ORCHARD STE 103
LAKE FOREST, CA 92630
Effective as of 01-JUL-23

MARSDEN, CLAIRE, SP
### C1. 網絡內提供者清單

#### 專科護理醫師

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<td>of 01-SEP-19</td>
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Your PCP's provider group may have its own network providers. Please see the following list. You can contact these providers directly. Please note, some services may require network providers to obtain Blue Shield authorization before being covered.

To access the network provider list online, please visit blueshieldca.com/fad.
**C1. 網絡內提供者清單**

**專科護理醫師**

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<td>SERAILE, KIRSTEN, NP</td>
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**Endocrinology**

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**Dermatology**

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*Your PCP’s provider network may have network-based mental health providers. See the below list. You may contact these providers directly. Please note, certain services may require authorization from the mental health provider before they can be covered. To get an online provider list, visit blueshieldca.com/fad.*
C1. 網絡內提供者清單

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C1. 網絡內提供者清單

专科護理醫師

Provider ID: N/A
29878 HAUN RD STE 200 MENIFEE, CA 92586 Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO
Provider ID: N/A
29878 HAUN RD STE 200 MENIFEE, CA 92586 Effective as of 01-SEP-17

CHARLES COWAN, TRICIA, DO
Provider ID: N/A
27851 BRADLEY RD STE 125 MENIFEE, CA 92586 Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO
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27851 BRADLEY RD STE 125 MENIFEE, CA 92586 Effective as of 01-JUN-19

CHARLES COWAN, TRICIA, DO
Provider ID: N/A
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CHARLES COWAN, TRICIA, DO
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27851 BRADLEY RD STE 125 MENIFEE, CA 92586 Effective as of 01-JUN-19

LAC, PETER, MD
Provider ID: N/A
27851 BRADLEY RD STE 125 MENIFEE, CA 92586 Effective as of 01-JUN-19

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NAGASUNDER, ARABHI, DO
Provider ID: N/A
27851 BRADLEY RD STE 125 MENIFEE, CA 92586 Teleservice Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO
Provider ID: N/A
27851 BRADLEY RD STE 125 MENIFEE, CA 92586 Teleservice Effective as of 01-OCT-23

NAGASUNDER, ARABHI, DO
Provider ID: N/A
27851 BRADLEY RD STE 125 MENIFEE, CA 92586 Teleservice Effective as of 01-FEB-24

NAGASUNDER, ARABHI, DO
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NATH, ASHOK, MD
Provider ID: N/A
27851 BRADLEY RD STE 125 MENIFEE, CA 92586 Effective as of 01-JUN-19

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27851 BRADLEY RD STE 125 MENIFEE, CA 92586 Effective as of 01-JUN-19

NATH, ASHOK, MD
Provider ID: N/A
29878 HAUN RD STE 200 MENIFEE, CA 92586
C1. 網絡內提供者清單

專科護理醫師

**NEUROLOGY**

**TALANKI, VARUN, MD**
Provider ID: N/A
27851 BRADLEY RD STE 125
MENIFEE, CA 92586
Teleservice
Effective as of 01-DEC-22

**OBSTETRICS / GYNECOLOGY**

**HOM, KATHERINE, MD**
Provider ID: N/A
29826 HAUN RD STE 209
MENIFEE, CA 92586
Effective as of 01-JUL-23

435
C1. 網絡內提供者清單

**URSO, MARY JO, DO**
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

**STOTLER, APRIL, OT**
Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

**STOTLER, APRIL, OT**
Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-24

**ZECHA, RICHARD, OT**
Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

**ZECHA, RICHARD, OT**
Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JAN-21

**OPHTHALMOLOGY**

**CHANG, TOM, MD**
Provider ID: N/A
29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUL-23

**CHOW, JASON, MD**
Provider ID: N/A
27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

**CULOTTA, ANTHONY, MD**
Provider ID: N/A
29950 HAUN RD STE 202
MENIFEE, CA 92586
Teleservice
Effective as of 01-JUL-23

**CULOTTA, ANTHONY, MD**
Provider ID: N/A
29950 HAUN RD STE 202
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Effective as of 01-JUL-23

**DAVIS, MICHAEL, MD**
Provider ID: N/A
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Effective as of 01-JUL-23

**GOLLOGLY, HEIDRUN, MD**
Provider ID: N/A
29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-OCT-17

**ISSA, REDA, MD**
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LIN, THEODORE, MD
Provider ID: N/A
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LOBUE, THOMAS, MD
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Effective as of 01-APR-14

SAMUEL, MICHAEL, MD
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SHELTON, RAYMOND, MD
Provider ID: N/A
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MENIFEE, CA 92586
Effective as of 01-MAY-23

SKINNER, ANTHONY, MD
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-APR-24

SKINNER, ANTHONY, MD
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-APR-24

SKINNER, ANTHONY, MD
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-APR-24

ZHOU, SIWEI, MD
Provider ID: N/A
27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD
Provider ID: N/A
27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-JUL-23

ARCHIBALD, JOHN, OD
Provider ID: N/A
27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-DEC-23

BARR, AUSTIN, OD
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-NOV-22

BARR, AUSTIN, OD
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-NOV-22

BARR, AUSTIN, OD
Provider ID: N/A
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Effective as of 01-NOV-22

BARR, AUSTIN, OD
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-NOV-22

HAMOUIE, JUDY, OD
Provider ID: N/A
29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-NOV-22

HAMOUIE, JUDY, OD
Provider ID: N/A
29950 HAUN RD STE 202
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Effective as of 01-NOV-22

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Effective as of 01-NOV-22

HAMOUIE, JUDY, OD
Provider ID: N/A
29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-NOV-22

FENNEMA, ERIC, OD
Provider ID: N/A
27168 NEWPORT RD STE 4
MENIFEE, CA 92584
Effective as of 01-FEB-22

FENNEMA, ERIC, OD
Provider ID: N/A
27168 NEWPORT RD STE 4
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Effective as of 01-SEP-22

HAMOUIE, JUDY, OD
Provider ID: N/A
29950 HAUN RD STE 202
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Effective as of 01-NOV-22

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Effective as of 01-NOV-22

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Provider ID: N/A
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Effective as of 01-NOV-22

HAMOUIE, JUDY, OD
Provider ID: N/A
29950 HAUN RD STE 202
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Effective as of 01-NOV-21

HAMOUIE, JUDY, OD
Provider ID: N/A
29950 HAUN RD STE 202
MENIFEE, CA 92586
Effective as of 01-JUL-23
C1. 網絡內提供者清單

專科護理醫師

MCINTYRE, DEBRA, OD Outputs
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD Outputs
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MCINTYRE, DEBRA, OD Outputs
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-DEC-17

MILLER, RYAN, OD
Provider ID: N/A
29950 HAUN RD STE 206
MENIFEE, CA 92586
Effective as of 01-APR-14

TO, BRITTANY, OD
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-23

ULIBARRI, MATTHEW, OD Outputs
Provider ID: N/A
29826 HAUN RD STE 100
MENIFEE, CA 92586
Effective as of 01-AUG-15

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29826 HAUN RD STE 100
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Effective as of 01-AUG-15

PHYSICAL MEDICINE / REHABILITATION

CHEN, HAMILTON, MD Outputs
Provider ID: N/A
27990 SHERMAN RD
MENIFEE, CA 92585
Effective as of 01-MAR-24

PHYSICIANS ASSISTANT

BUSTAMANTE, ANGEL, PA Outputs
Provider ID: N/A
29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

BUSTAMANTE, ANGEL, PA Outputs
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Effective as of 01-AUG-20

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Provider ID: N/A
29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20

PSYCHIATRY

ANDERSEN, CLAIRE, MD Outputs
Provider ID: N/A
26926 CHERRY HILLS BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

ANDERSEN, CLAIRE, MD Outputs
Provider ID: N/A
26926 CHERRY HILLS BLVD STE B
MENIFEE, CA 92586
Effective as of 01-DEC-20

PERSAUD, PRIA, MD Outputs
Provider ID: N/A
26926 CHERRY HILLS BLVD STE B
MENIFEE, CA 92586
Effective as of 01-AUG-20

PERSAUD, PRIA, MD Outputs
Provider ID: N/A
26926 CHERRY HILLS
### 專科護理醫師

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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

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<td>HIGGINS, DAWN, PT†</td>
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<td>01-JUL-22</td>
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<td>HIGGINS, DAWN, PT†</td>
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<td>KARODY, ATULA, PT</td>
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<td>REED, SAVONNA, PT†</td>
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<td>SANCHEZ, EMILY, PT</td>
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</tbody>
</table>

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

SANCHEZ, EMILY, PT
Provider ID: N/A
29798 HAUN RD STE 201
MENIFEE, CA 92586
Effective as of 01-JUN-23

SANCHEZ, EMILY, PT
Provider ID: N/A
30141 ANTELOPE RD STE A
MENIFEE, CA 92584
Effective as of 01-JUN-23

RHEUMATOLOGY

BRAVO, ARLENE, MD†
Provider ID: N/A
29798 HAUN RD
MENIFEE, CA 92586
Effective as of 01-APR-21

COLBURN, KEITH, MD†
Provider ID: N/A
29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-MAR-21

MEHTA, AMAL, MD†
Provider ID: N/A
29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-SEP-18

MEHTA, CHANDRAKANT, MD†
Provider ID: N/A
29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-JUL-23

SURGERY GENERAL

IGWE, DANIEL, MD†
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

IGWE, DANIEL, MD†
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

SURGERY ORTHOPEDIC

CHAUDHURI, KALI, MD†
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

CHAUDHURI, KALI, MD†
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

TRIVEDI, JANKI, MD†
Provider ID: N/A
29798 HAUN RD STE 301
MENIFEE, CA 92586
Effective as of 01-AUG-20
C1. 網絡內提供者清單

專科護理醫師

CHAUDHURI, KALI, MD†
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-AUG-21

DAVENPORT, STEPHEN, MD
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD†
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-JUL-23

GANDE, ABHIRAM, MD†
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD†
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29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

GANDE, ABHIRAM, MD†
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-SEP-22

PANSE, MILIND, MD†
Provider ID: N/A
29826 HAUN RD STE 200
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Effective as of 01-NOV-18

PANSE, MILIND, MD†
Provider ID: N/A
29826 HAUN RD STE 200
MENIFEE, CA 92586
Effective as of 01-NOV-18

UROLOGY

CRISSELL, MONISHA, MD†
Provider ID: N/A
29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†
Provider ID: N/A
29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†
Provider ID: N/A
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Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†
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Effective as of 01-JUL-23

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Provider ID: N/A
29798 HAUN RD STE 104
MENIFEE, CA 92586
Effective as of 01-JUL-23

LUTTGE, SCOTT, MD
Provider ID: N/A
29826 HAUN RD STE 209
MENIFEE, CA 92586
Effective as of 01-MAY-23

NIHIRA, MIKIO, MD†
Provider ID: N/A
27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

NIHIRA, MIKIO, MD†
Provider ID: N/A
27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

NIHIRA, MIKIO, MD†
Provider ID: N/A
27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CARR, WARNER, MD
Provider ID: N/A
27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ALLERGY IMMUNOLOGY

BASEN, TYLER, MD†
Provider ID: N/A
26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-20

BASEN, TYLER, MD†
Provider ID: N/A
26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-DEC-20

BASEN, TYLER, MD†
Provider ID: N/A
26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-SEP-22

BASEN, TYLER, MD†
Provider ID: N/A
26691 PLAZA STE 170
MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-SEP-22

CARR, WARNER, MD
Provider ID: N/A
27800 MEDICAL CENTER
RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

442
C1. 網絡內提供者清單
專科護理醫師

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C1. 網絡內提供者清單

MEHTA, VINAY, MD
Provider ID: N/A
27800 MEDICAL CENTER RD STE 244
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

VENKAT, GEETA, MD†
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

VENKAT, GEETA, MD†
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-17

ANESTHESIOLOGY
GERAYLI, AFSHIN, MD†
Provider ID: N/A
25982 PALA STE 280 MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

GERAYLI, AFSHIN, MD†
Provider ID: N/A
25982 PALA STE 280 MISSION VIEJO, CA 92691
Teleservice
Effective as of 01-AUG-22

ANESTHESIOLOGY PAIN MANAGEMENT

BESHAI, ALFRED, MD
Provider ID: N/A
26691 PLAZA STE 170 MISSION VIEJO, CA 92691

SHAHBAZIAN, MICHAEL, MD†
Provider ID: N/A
25982 PALA STE 280 MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

AUDIOLOGIST

NIAVARANY, PIRAYEH, AuD
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200 MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

NIAVARANY, PIRAYEH, AuD
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200 MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

PANEK, KRISTI, AuD
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200 MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

PANEK, KRISTI, AuD
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200 MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

CARDIAC ELECTROPHYSIOLOGY

DESAI, ASEEM, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 250 MISSION VIEJO, CA 92691

### C1. 網絡內提供者清單

#### 專科護理醫師

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<td><strong>CUA, BENNETT, MD</strong></td>
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*Effective as of 01-SEP-10*

*Effective as of 01-OCT-13*

*Effective as of 01-AUG-18*

*Effective as of 01-NOV-12*

*Effective as of 01-OCT-99*

*Effective as of 01-OCT-20*

*Effective as of 01-NOV-05*

*Effective as of 01-NOV-12*

*Effective as of 01-NOV-12*

*Effective as of 01-DEC-14*

*Effective as of 01-NOV-12*

*Effective as of 01-NOV-12*

*Effective as of 01-AUG-18*

---

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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<td>DAVID, MARY LOU, NP†</td>
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Your PCP's doctor group may have their own network mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require the mental health service provider to obtain Blue Shield's prior authorization before the service can be covered.

If you want to access the mental health service providers' list online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單
專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PARK, SE, NP
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

PASICOLAN, MARI, NP
Provider ID: N/A
26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP
Provider ID: N/A
26012 MARGUERITE PKWY
STE H
MISSION VIEJO, CA 92692
Effective as of 01-DEC-22

PASICOLAN, MARI, NP
Provider ID: N/A
30897 GATEWAY PL STE F
MISSION VIEJO, CA 92694
Effective as of 01-DEC-22

TORIOLA, ABIODUN, NP
Provider ID: N/A
30240 RANCHO VIEJO
SUITE E
MISSION VIEJO, CA 92675
Effective as of 01-JUL-23

DERMATOLOGY

BISUNA, BLANCA, MD†
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 170
MISSION VIEJO, CA 92691
Effective as of 01-MAR-16

DICESARE, DANIEL, MD
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

DICESARE, DANIEL, MD
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 440
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19

LEVIN, JACQUELINE, DO†
Provider ID: N/A
26726 CROWN VALLEY
PKWY STE 220
MISSION VIEJO, CA 92691
Effective as of 01-NOV-15

LONGBERG, AUSTIN, DO†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

LONGBERG, AUSTIN, DO†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

NGUYEN, TUYET, MD
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

NGUYEN, TUYET, MD
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 435
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

ZHAN, FRANK, MD†
Provider ID: N/A
26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

ZHAN, FRANK, MD†
Provider ID: N/A
26691 PLAZA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23
EMERGENCY MEDICINE

ELPEDES, BERNARD, DO†
Provider ID: N/A
23962 ALICIA PKWY STE 11
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

ENDOCRINOLOGY
METABOLISM DIABETES

BARRERA, JOSEPH, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-DEC-02

BUI, AMY-VAN, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

CHAN, JESSICA, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†
Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

MULFORD, MIM, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

MISSION VIEJO, CA 92691
Effective as of 01-MAR-22

HOSSEINI, ALIREZA, MD†
Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†
Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-OCT-21

HOSSEINI, ALIREZA, MD†
Provider ID: N/A
25982 PALA STE 140
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

HOSSEINI, ALIREZA, MD†
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25982 PALA STE 140
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Effective as of 01-NOV-12

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MISSION VIEJO, CA 92691
Effective as of 01-MAR-22
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*Effective as of*:
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- 01-SEP-21
- 01-APR-12
- 01-APR-21
- 01-JUL-07
- 01-OCT-99

For more information on the network providers, please visit [blueshieldca.com/fad](http://blueshieldca.com/fad).
C1. 網絡內提供者清單
專科護理醫師

CHAURASIA, OM, MD
Provider ID: N/A
26421 CROWN VALLEY PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

CHAURASIA, OM, MD
Provider ID: N/A
26421 CROWN VALLEY PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

CHAURASIA, OM, MD
Provider ID: N/A
26421 CROWN VALLEY PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

CHAURASIA, OM, MD
Provider ID: N/A
26421 CROWN VALLEY PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CHAURASIA, OM, MD
Provider ID: N/A
26421 CROWN VALLEY PKWY STE 140A
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

CHU, ERIC, MD†
Provider ID: N/A
27871 MEDICAL CENTER RD
STE 240
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

CHU, ERIC, MD†
Provider ID: N/A
27799 MEDICAL CENTER RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

CHU, ERIC, MD†
Provider ID: N/A
27799 MEDICAL CENTER RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-APR-21

KIM, DANIEL, MD†
Provider ID: N/A
27799 MEDICAL CENTER RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KIM, DANIEL, MD†
Provider ID: N/A
27799 MEDICAL CENTER RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

NGUYEN, DOUGLAS, MD†
Provider ID: N/A
27799 MEDICAL CENTER RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

RAHMAN, HABIB, MD
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 475
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

RODRIGUES, DANIADL, MD†
Provider ID: N/A
27799 MEDICAL CENTER RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

RODRIGUES, DANIADL, MD†
Provider ID: N/A
27799 MEDICAL CENTER RD
STE 310
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ZABIHI, RAMIN, MD†

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. Network Provider List

Provider ID: N/A

ZABIHI, RAMIN, MD
Provider ID: N/A

ZABIHI, RAMIN, MD
Provider ID: N/A

ZABIHI, RAMIN, MD
Provider ID: N/A

ZABIHI, RAMIN, MD
Provider ID: N/A

GYNECOLOGY

KANALY, KIM, MD
Provider ID: N/A

KANALY, KIM, MD
Provider ID: N/A

KANALY, KIM, MD
Provider ID: N/A

HEMATOLOGY / ONCOLOGY

BENDER, RICHARD, MD
Provider ID: N/A

BENDER, RICHARD, MD
Provider ID: N/A

BENDER, RICHARD, MD
Provider ID: N/A

HU, JOHN, MD
Provider ID: N/A

HU, JOHN, MD
Provider ID: N/A

HU, JOHN, MD
Provider ID: N/A

HUANG, DANIEL, MD
Provider ID: N/A

HUANG, DANIEL, MD
Provider ID: N/A

HUANG, DANIEL, MD
Provider ID: N/A

LAZO, NELLY, MD
Provider ID: N/A

LAZO, NELLY, MD
Provider ID: N/A

LAZO, NELLY, MD
Provider ID: N/A

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

WALLACE, PATRICIA, MD
Provider ID: N/A

WALLACE, PATRICIA, MD
Provider ID: N/A

WALLACE, PATRICIA, MD
Provider ID: N/A

HU, JOHN, MD
Provider ID: N/A

HU, JOHN, MD
Provider ID: N/A

HU, JOHN, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-20

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-MAY-12

26732 CROWN VALLEY
PKWY STE 327
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

26800 CROWN VALLEY
PKWY STE 308
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

LAZO, NELLY, MD†
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-NOV-18

LAZO, NELLY, MD†
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16

LI, MING, MD†
Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

LI, MING, MD†
Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

INTERNAL MEDICINE
AZAD, HABIB, MD†
Provider ID: N/A
27800 MEDICAL CENTER
RD STE 220
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

INFECTIONOUS DISEASE
REDDY, JAGADEESH, MD
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

REDDY, JAGADEESH, MD
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16

REDDY, JAGADEESH, MD
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUL-16

WAYNE, EDGAR, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

WAYNE, EDGAR, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 275
MISSION VIEJO, CA 92691
Effective as of 01-JUN-21

GEE, JOEY, DO†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 385
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

GOLDBERG, ROBERT, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 205
MISSION VIEJO, CA 92691
Effective as of 01-NOV-12

JIAKING, FEN, MD†
Provider ID: N/A
27799 MEDICAL CENTER
RD
STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEPT-22

JIAKING, FEN, MD†
Provider ID: N/A
27799 MEDICAL CENTER
RD
C1. 網絡內提供者清單

专科護理醫師

STE 460
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

KOVARCS, DAVID, MD†
Provider ID: N/A
.getAddress(26732 CROWN VALLEY PKWY STE 151 MISSION VIEJO, CA 92691)
Effective as of 01-APR-16

MIEL, RUFINA, MD†
Provider ID: N/A
.getAddress(26732 CROWN VALLEY PKWY STE 271 MISSION VIEJO, CA 92691)
Effective as of 01-APR-19

QURESHI, TAUSEEF, MD†
Provider ID: N/A
.getAddress(26800 CROWN VALLEY PKWY STE 250 MISSION VIEJO, CA 92691)
Effective as of 01-MAY-16

INTERNAL MEDICINE

SPORTS MEDICINE

DAVIS, KELLY, MD†
Provider ID: N/A
.getAddress(25982 PALA STE 230 MISSION VIEJO, CA 92691)
Effective as of 01-OCT-18

INTERVENTIONAL

CARDIOLOGY

DANON, SAAR, MD†
Provider ID: N/A
.getAddress(30492 GATEWAY PL STE 110 MISSION VIEJO, CA 92694)
Effective as of 01-MAY-21

DANON, SAAR, MD†
Provider ID: N/A
.getAddress(30492 GATEWAY PL STE 110 MISSION VIEJO, CA 92694)
Effective as of 01-JAN-15

LOUSSARARIAN, ARTHUR, MD†
Provider ID: N/A
.getAddress(26800 CROWN VALLEY PKWY STE 250 MISSION VIEJO, CA 92691)
Effective as of 01-MAY-16

LOUSSARARIAN, ARTHUR, MD†
Provider ID: N/A
.getAddress(26800 CROWN VALLEY PKWY STE 120 MISSION VIEJO, CA 92691)
Effective as of 01-APR-11

LOUSSARARIAN, ARTHUR, MD†
Provider ID: N/A
.getAddress(26800 CROWN VALLEY PKWY STE 250 MISSION VIEJO, CA 92691)
Effective as of 01-MAY-12

HUNG, LYNNE, MD†
Provider ID: N/A
.getAddress(26800 CROWN VALLEY PKWY STE 250 MISSION VIEJO, CA 92691)
Effective as of 01-MAY-17

SUK, DAVID, MD

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SUK, DAVID, MD
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MARRIAGE FAMILY
THERAPIST

ORTIZ, TINA, MFT†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

ORTIZ, TINA, MFT†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 325
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

MEDICAL ONCOLOGY

BENDER, RICHARD, MD†
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

BENDER, RICHARD, MD†
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 271
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NPHROLOGY

ALLAMEHZADEH, REZA, MD†
Provider ID: N/A
25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-16

ALLAMEHZADEH, REZA, MD†
Provider ID: N/A
25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
Provider ID: N/A
25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
Provider ID: N/A
25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
Provider ID: N/A
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MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
Provider ID: N/A
25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

ALLAMEHZADEH, REZA, MD†
Provider ID: N/A
25982 PALA
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

AZAD, HABIB, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

AZAD, HABIB, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

AZAD, HABIB, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

CHEN, MAY, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

CHEN, MAY, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

NAWAR, MAGDY, MD†
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 485
C1. 網絡內提供者清單

### 專科護理醫師

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Effective As Of</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAWAR, MAGDY, MD†</td>
<td>26800 CROWN VALLEY PKWY STE 485 MISSION VIEJO, CA 92691</td>
<td>01-MAR-99</td>
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<tr>
<td>NAWAR, MAGDY, MD†</td>
<td>26800 CROWN VALLEY PKWY STE 250 MISSION VIEJO, CA 92691</td>
<td>01-JAN-15</td>
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<tr>
<td>RAVIKUMAR, ASHA, MD†</td>
<td>27871 MEDICAL CENTER RD STE 250 MISSION VIEJO, CA 92691</td>
<td>01-JAN-14</td>
</tr>
<tr>
<td>TEACHER, THEODORE, MD†</td>
<td>26691 PLAZA STE 235 MISSION VIEJO, CA 92691</td>
<td>01-APR-23</td>
</tr>
<tr>
<td>TEACHER, THEODORE, MD†</td>
<td>26691 PLAZA STE 235 MISSION VIEJO, CA 92691</td>
<td>01-JAN-15</td>
</tr>
<tr>
<td>TRAN, STEVE, MD†</td>
<td>26800 CROWN VALLEY PKWY STE 485 MISSION VIEJO, CA 92691</td>
<td>01-MAY-23</td>
</tr>
<tr>
<td>TRAN, STEVE, MD†</td>
<td>26800 CROWN VALLEY PKWY STE 250 MISSION VIEJO, CA 92691</td>
<td>01-JAN-15</td>
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<tr>
<td>NEUROLOGY</td>
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<tr>
<td>DORRIZ, PARSHAW, MD†</td>
<td>26800 CROWN VALLEY PKWY STE 385 MISSION VIEJO, CA 92691</td>
<td>01-SEP-18</td>
</tr>
<tr>
<td>DORRIZ, PARSHAW, MD†</td>
<td>26800 CROWN VALLEY PKWY STE 385 MISSION VIEJO, CA 92691</td>
<td>01-MAR-24</td>
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<tr>
<td>FAHIMI, GOLSHAN, MD</td>
<td>26991 CROWN VALLEY PKWY STE 100 MISSION VIEJO, CA 92691</td>
<td>01-JUN-23</td>
</tr>
<tr>
<td>NIK, ANDREW, MD†</td>
<td>26800 CROWN VALLEY PKWY STE 385 MISSION VIEJO, CA 92691</td>
<td>01-JAN-15</td>
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</tbody>
</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
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<th>Name</th>
<th>Specialization</th>
<th>Provider ID</th>
<th>Effective As Of</th>
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<tbody>
<tr>
<td>SALEHI, HAMID, MD†</td>
<td>NEUROLOGY CHILD</td>
<td>N/A</td>
<td>01-DEC-16</td>
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<tr>
<td>RAHIM, BASIT, MD†</td>
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<td>N/A</td>
<td>01-AUG-19</td>
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<td>VORA, RONAK, DO†</td>
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<td>ELBALALESY, NASER, MD†</td>
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<td>ELBALALESY, NASER, MD†</td>
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<td>TEACHER, THEODORE, MD†</td>
<td></td>
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<td>01-DEC-16</td>
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*Effective as of 01-DEC-16*

NIK, ANDREW, MD†
Provider ID: N/A
26800 CROWN VALLEY Pkwy STE 385 MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

RAHIM, BASIT, MD†
Provider ID: N/A
26800 CROWN VALLEY Pkwy STE 385 MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

SALEHI, HAMID, MD†
Provider ID: N/A
26691 PLAZA STE 235 MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

SALEHI, HAMID, MD†
Provider ID: N/A
26691 PLAZA STE 235 MISSION VIEJO, CA 92691
Effective as of 01-DEC-20

SALEHI, HAMID, MD†
Provider ID: N/A
26691 PLAZA STE 235 MISSION VIEJO, CA 92691
Effective as of 01-AUG-11

SALEHI, HAMID, MD†
Provider ID: N/A
26691 PLAZA STE 235 MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

SPOKOYNY, Eleonora, MD†
Provider ID: N/A
25982 Pala STE 150 MISSION VIEJO, CA 92691
Effective as of 01-JAN-15

SPOKOYNY, Eleonora, MD†
Provider ID: N/A
25982 Pala STE 150 MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

SPOKOYNY, Eleonora, MD†
Provider ID: N/A
25982 Pala STE 150 MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPOKOYNY, Eleonora, MD†
Provider ID: N/A
25982 Pala STE 150 MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPOKOYNY, Eleonora, MD†
Provider ID: N/A
25982 Pala STE 150 MISSION VIEJO, CA 92691
Effective as of 01-JAN-20

SPOKOYNY, Eleonora, MD†
Provider ID: N/A
25982 Pala STE 150 MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

SPOKOYNY, Eleonora, MD†
Provider ID: N/A
25982 Pala STE 150 MISSION VIEJO, CA 92691
Effective as of 01-DEC-08

TEACHER, THEODORE, MD†
Provider ID: N/A
26691 PLAZA STE 235 MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

TEACHER, THEODORE, MD†
Provider ID: N/A
26691 PLAZA STE 235 MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

VORA, RONAK, DO†
Provider ID: N/A
26800 CROWN VALLEY Pkwy STE 385 MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

VORA, RONAK, DO†
Provider ID: N/A
26800 CROWN VALLEY Pkwy STE 385 MISSION VIEJO, CA 92691
Effective as of 01-APR-23

VORA, RONAK, DO†
Provider ID: N/A
26800 CROWN VALLEY Pkwy STE 385 MISSION VIEJO, CA 92691
Effective as of 01-APR-23

**NEUROLOGY CHILD**
C1. 網絡內提供者清單

**OBSTETRICS / GYNECOLOGY**

ELBALALESY, NASER, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 460
MISSION VIEJO, CA 92691
Effective as of 01-DEC-16

ELBALALESY, NASER, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ELBALALESY, NASER, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 510
MISSION VIEJO, CA 92691
Effective as of 01-MAR-19

ABRAVESH, SOODABEH, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

BAGINSKI, LEON, MD†
Provider ID: N/A
27800 MEDICAL CENTER RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

BAGINSKI, LEON, MD†
Provider ID: N/A
27800 MEDICAL CENTER RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-JUL-20

BAGINSKI, LEON, MD†
Provider ID: N/A
27800 MEDICAL CENTER RD STE 310
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

BAILEY, THOMAS, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-JUL-14

BAILEY, THOMAS, MD†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 525
MISSION VIEJO, CA 92691
Effective as of 01-MAR-99

BENZL, JERRY, MD†
Provider ID: N/A
C1. 網絡內提供者清單
專科護理醫師

<table>
<thead>
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<td>2011-06-01</td>
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<td>26902 OSO PKWY STE 180</td>
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<td>CVAR, KATHRYN, MD</td>
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<td>FARAZ ESLAMI, PARASTOO, MD</td>
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C1. 網絡內提供者清單

網絡內提供者清單

LEAVITT, JAMIE, MD†
Provider ID: N/A

MELKONIAN, VIKEN, MD†
Provider ID: N/A

MELKONIAN, VIKEN, MD†
Provider ID: N/A

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Provider ID: N/A

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TRAN, TIFFANY, MD
Provider ID: N/A

TRAN, TIFFANY, MD
Provider ID: N/A

TRAN, TIFFANY, MD
Provider ID: N/A

TRAN, BRYAN, MD
Provider ID: N/A

OPHTHALMOLOGY

AHMED, SARAH, MD†
Provider ID: N/A
C1. 網絡內提供者清單

專科護理醫師

AHMED, SARAH, MD†
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26701 CROWN VALLEY PKWY
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AHMED, SARAH, MD†
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26701 CROWN VALLEY PKWY
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AHMED, SARAH, MD†
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26701 CROWN VALLEY PKWY
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AHMED, SARAH, MD†
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26701 CROWN VALLEY PKWY
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AMRA, NOOR, MD†
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AMRA, NOOR, MD†
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26701 CROWN VALLEY PKWY
MISSION VIEJO, CA 92691
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27871 MEDICAL CENTER RD
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CUNNINGHAM-AHUMADA, ROSE, DO†
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27871 MEDICAL CENTER RD
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CUNNINGHAM-AHUMADA, ROSE, DO†
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27871 MEDICAL CENTER RD
STE 120
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BANUELOS, LYDIA, MD†
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26691 PLAZA STE 250
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BANUELOS, LYDIA, MD†
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26691 PLAZA STE 250
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CUNNINGHAM-AHUMADA, ROSE, DO†
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27871 MEDICAL CENTER RD
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Effective as of 01-JUN-16

CUNNINGHAM-AHUMADA, ROSE, DO†
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27871 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19
### C1. 網絡內提供者清單
#### 專科護理醫師

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<td>KRAD, OMAR, MD</td>
<td>27871 MEDICAL CENTER RD STE 120 MISSION VIEJO, CA 92691</td>
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<td>KRAD, OMAR, MD</td>
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<td>01-JAN-18</td>
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<td>01-NOV-14</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。

您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

SALEHI-HAD, HANI, MD†
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26726 CROWN VALLEY PKWY STE 220
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26726 CROWN VALLEY PKWY STE 220
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26800 CROWN VALLEY PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

TAI, AUDREY, DO†
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

TAYANI, RAMIN, MD†
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-12

TAYANI, RAMIN, MD
Provider ID: N/A
26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

TAYANI, RAMIN, MD
Provider ID: N/A
26691 PLAZA STE 250
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Effective as of 01-MAY-23

TAYANI, RAMIN, MD
Provider ID: N/A
26691 PLAZA STE 250
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

OPTOMETRIST

ANSARI, SHORA, OD
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27871 MEDICAL CENTER RD STE 120
MISSION VIEJO, CA 92691
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WONG, RANDALL, OD
Provider ID: N/A
26701 CROWN VALLEY PKWY
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

OTOLARYNGOLOGY

BREDENKAMP, JAMES, MD†
您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

HEINRICH, JAMES, MD
Provider ID: N/A
26730 CROWN VALLEY PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

HEINRICH, JAMES, MD
Provider ID: N/A
26730 CROWN VALLEY PKWY STE 250
MISSION VIEJO, CA 92691
Effective as of 01-APR-11

JAKOBSEN, MICHAEL, MD†
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

JAKOBSEN, MICHAEL, MD†
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26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-MAR-04

JAKOBSEN, MICHAEL, MD†
Provider ID: N/A
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LUU, QUANG, MD†
Provider ID: N/A
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LUU, QUANG, MD†
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Effective as of 01-OCT-14

LUU, QUANG, MD†
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Effective as of 01-OCT-22

MUNDI, JAGMEET, MD†
Provider ID: N/A
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MUNDI, JAGMEET, MD†
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26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
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Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†
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26726 CROWN VALLEY PKWY STE 200
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Effective as of 01-OCT-22

MUNDI, JAGMEET, MD†
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26726 CROWN VALLEY PKWY STE 200
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Effective as of 01-OCT-18

MUNDI, JAGMEET, MD†
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26726 CROWN VALLEY PKWY STE 200
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Effective as of 01-OCT-22

MUNDI, JAGMEET, MD†
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26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-14

MUNDI, JAGMEET, MD†
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

THOMPSON, CHRISTOPHER, MD†
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-18
C1. 網絡內提供者清單

專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-JAN-18

THOMPSON, CHRISTOPHER, MD²
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-FEB-16

THOMPSON, CHRISTOPHER, MD²
Provider ID: N/A
26726 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
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PEDIATRIC CARDIOLOGY

CHUN, DAVID, MD²
Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-MAY-15

CHUN, DAVID, MD²
Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

GANDY, JODIE, MD²
Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

GANDY, JODIE, MD²
Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

GANDY, JODIE, MD²
Provider ID: N/A
26691 PLAZA STE 210
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GANDY, JODIE, MD²
Provider ID: N/A
26691 PLAZA STE 210
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MUHONEN, LINDA, MD
Provider ID: N/A
26691 PLAZA STE 130
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RAHIMI, MOHAMMAD, MD²
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30492 GATEWAY PL STE 110
MISSION VIEJO, CA 92694
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RAHIMI, MOHAMMAD, MD²
Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
30492 GATEWAY PL STE 110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20
WEINER, KEITH, MD†
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26691 PLAZA STE 210
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RAHIMI, MOHAMMAD, MD†
Provider ID: N/A
30492 GATEWAY PL STE 110
MISSION VIEJO, CA 92694
Effective as of 01-DEC-20
RAHIMI, MOHAMMAD, MD†
Provider ID: N/A
30492 GATEWAY PL STE 110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21
RAHIMI, MOHAMMAD, MD†
Provider ID: N/A
30492 GATEWAY PL STE 110
MISSION VIEJO, CA 92694
Effective as of 01-JAN-21
RAHIMI, MOHAMMAD, MD†
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30492 GATEWAY PL STE 110
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WEINER, KEITH, MD†
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26691 PLAZA STE 210
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Effective as of 01-NOV-14

WEINER, KEITH, MD
Provider ID: N/A
26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21
WEINER, KEITH, MD
Provider ID: N/A
26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23
WEINER, KEITH, MD
Provider ID: N/A
26691 PLAZA STE 210
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21
WEINER, KEITH, MD†
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26691 PLAZA STE 160
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WEINER, KEITH, MD
Provider ID: N/A
26691 PLAZA STE 160
MISSION VIEJO, CA 92691
Effective as of 01-APR-23
ARREITA, ANTONIO, MD†
Provider ID: N/A
27800 MEDICAL CENTER RD STE 264
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19
ARREITA, ANTONIO, MD†
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27800 MEDICAL CENTER RD STE 264
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19
ARREITA, ANTONIO, MD†
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27800 MEDICAL CENTER RD STE 264
MISSION VIEJO, CA 92691
Effective as of 01-NOV-19
PEDIATRIC INFECTIOUS DISEASES
ARREITA, ANTONIO, MD†
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27800 MEDICAL CENTER RD STE 264
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PEDIATRIC NEPHROLOGY
ZAMAN, RUMINA, MD
Provider ID: N/A
26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

PEDIATRIC SPORTS MEDICINE
DAVIS, KELLY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18
DAVIS, KELLY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19
DAVIS, KELLY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19
Effective as of 01-DEC-20
DAVIS, KELLY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DAVIS, KELLY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-18

PEDIATRIC SURGERY
ORTHOPEDIC
AMINIAN, AFSHIN, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

AMINIAN, AFSHIN, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

AMINIAN, AFSHIN, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-14

AMINIAN, AFSHIN, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-12
CAO, LISA, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-23

CAO, LISA, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

CAO, LISA, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

DAVIS, KELLY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

DOBYNS, JEFFREY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

DOBYNS, JEFFREY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DOBYNS, JEFFREY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

LALONDE, FRANCOIS, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20
MCMICHAEL, JESSICA, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20
MISAGHI, AMIRHOSSEIN, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JAN-20
ROSENFELD, SAMUEL, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05
SCHLECHTER, JOHN, DO†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-FEB-09
WEINERT, CARL, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUL-05

PEDIATRICS
CHAMBERLIN, JOSHUA, MD†
Provider ID: N/A
27800 MEDICAL CENTER RD STE 110
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

PHYS MED/ REHAB PAIN
### MEDICINE

**DEDES, HOWARD, MD**  
Provider ID: N/A  
26137 LA PAZ RD STE 140  
MISSION VIEJO, CA 92691  
Effective as of 01-APR-23  

**CUSHING, JAMES, MD**  
Provider ID: N/A  
27700 MEDICAL CENTER RD  
MISSION VIEJO, CA 92691  
Effective as of 01-APR-23  

**KIM, BONNIE, MD**  
Provider ID: N/A  
26302 LA PAZ RD STE 106  
MISSION VIEJO, CA 92691  
Effective as of 01-SEP-21  

### REHABILITATION

**CUSHING, JAMES, MD**  
Provider ID: N/A  
27700 MEDICAL CENTER RD  
MISSION VIEJO, CA 92691  
Effective as of 01-APR-11  

**CUSHING, JAMES, MD**  
Provider ID: N/A  
27700 MEDICAL CENTER RD  
MISSION VIEJO, CA 92691  
Effective as of 01-SEP-10  

**FADAVI, HAMID, DO**  
Provider ID: N/A  
26932 OSO PKWY STE 275  
MISSION VIEJO, CA 92691  
Effective as of 01-DEC-21  

**FADAVI, HAMID, DO**  
Provider ID: N/A  
26932 OSO PKWY STE 275  
MISSION VIEJO, CA 92691  
Effective as of 01-DEC-21  

**FADAVI, HAMID, DO**  
Provider ID: N/A  
26932 OSO PKWY STE 275  
MISSION VIEJO, CA 92691  
Effective as of 01-DEC-21  

**HANJAN, TIVA, MD**  
Provider ID: N/A  
26401 CROWN VALLEY PKWY STE 101  
MISSION VIEJO, CA 92691  
Effective as of 01-FEB-18  

**KIM, BONNIE, MD**  
Provider ID: N/A  
26302 LA PAZ RD STE 106  
MISSION VIEJO, CA 92691  
Effective as of 01-SEP-21  

**KIM, BONNIE, MD**  
Provider ID: N/A  
26302 LA PAZ RD STE 106  
MISSION VIEJO, CA 92691  
Effective as of 01-SEP-21  

**KING, FRANK, MD**  
Provider ID: N/A  
26932 OSO PKWY STE 275  
MISSION VIEJO, CA 92691  
Effective as of 01-JAN-16  

---

**PHYSICAL MEDICINE / REHABILITATION**

**DEDES, HOWARD, MD**  
Provider ID: N/A  
26137 LA PAZ RD STE 140  
MISSION VIEJO, CA 92691  
Effective as of 01-APR-23  

**CUSHING, JAMES, MD**  
Provider ID: N/A  
27700 MEDICAL CENTER RD  
MISSION VIEJO, CA 92691  
Effective as of 01-APR-23  

**CUSHING, JAMES, MD**  
Provider ID: N/A  
27700 MEDICAL CENTER RD  
MISSION VIEJO, CA 92691  
Effective as of 01-SEP-10  

**CUSHING, JAMES, MD**  
Provider ID: N/A  
27700 MEDICAL CENTER RD  
MISSION VIEJO, CA 92691  
Effective as of 01-MAR-99  

**FADAVI, HAMID, DO**  
Provider ID: N/A  
26932 OSO PKWY STE 275  
MISSION VIEJO, CA 92691  
Effective as of 01-NOV-14  

**FADAVI, HAMID, DO**  
Provider ID: N/A  
26932 OSO PKWY STE 275  
MISSION VIEJO, CA 92691  
Effective as of 01-NOV-21  

**FADAVI, HAMID, DO**  
Provider ID: N/A  
26932 OSO PKWY STE 275  
MISSION VIEJO, CA 92691  
Effective as of 01-NOV-21  

**FADAVI, HAMID, DO**  
Provider ID: N/A  
26932 OSO PKWY STE 275  
MISSION VIEJO, CA 92691  
Effective as of 01-NOV-21  

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### C1. 網絡內提供者清單

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<thead>
<tr>
<th>專科護理醫師</th>
<th>有效日期</th>
<th>地址</th>
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<td><strong>KING, FRANK, MD</strong></td>
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</table>
C1. 網絡內提供者清單
專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

PARK, SUNG, PA
Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

SOBHANIAN, SHAHAB, PA
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

SOBHANIAN, SHAHAB, PA
Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-MAR-24

TERRERI, NATALIE, PA
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-JUN-23

PODIATRIST
DAL PORTO-KUJANPAA,

STEPHANIE, DPM
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

DAL PORTO-KUJANPAA,
STEPHANIE, DPM
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

DAL PORTO-KUJANPAA,
STEPHANIE, DPM
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

GOLSHAHI, BAHAR, DPM²
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM²
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 420
MISSION VIEJO, CA 92691
Effective as of 01-JUN-20

GOLSHAHI, BAHAR, DPM²
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 485
MISSION VIEJO, CA 92691
Effective as of 01-AUG-19

MCCANN, JAN, DPM
Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

HEHE, KYLE, DPM
Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

HAIDER, SANDRA, DPM
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

DAL PORTO-KUJANPAA,
STEPHANIE, DPM
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

HAIDER, SANDRA, DPM
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

HAIDER, SANDRA, DPM
Provider ID: N/A
26732 CROWN VALLEY
PKWY STE 317
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

GOLSHAHI, BAHAR, DPM
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

GOLSHAHI, BAHAR, DPM
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

GOLSHAHI, BAHAR, DPM
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-NOV-22

HEHE, KYLE, DPM
Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

HEHE, KYLE, DPM
Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-AUG-23

GOLSHAHI, BAHAR, DPM
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM
Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM
Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM
Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

GOLSHAHI, BAHAR, DPM
Provider ID: N/A
26691 PLAZA STE 201
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

MCGRATH, BENJAMIN, DPM
| Provider ID: N/A | 26732 CROWN VALLEY PKWY STE 317 |
| MISSION VIEJO, CA 92691 | Effective as of 01-SEP-23 |
| **MCGRATH, BENJAMIN, DPM** | Provider ID: N/A |
| 26732 CROWN VALLEY PKWY STE 317 |
| MISSION VIEJO, CA 92691 | Effective as of 01-MAY-23 |

| NGUYEN, HAN, DPM† | Provider ID: N/A |
| 26732 CROWN VALLEY PKWY STE 317 |
| MISSION VIEJO, CA 92691 | Effective as of 01-SEP-23 |

| Provider ID: N/A | 26991 CROWN VALLEY PKWY STE 100 |
| MISSION VIEJO, CA 92691 | Effective as of 01-OCT-21 |

| NOSRATI, SAM, DPM† | Provider ID: N/A |
| 26691 PLAZA STE 201 |
| MISSION VIEJO, CA 92691 | Effective as of 01-FEB-24 |

| Provider ID: N/A | 26732 CROWN VALLEY PKWY STE 317 |
| MISSION VIEJO, CA 92691 | Effective as of 01-Oct-23 |

| NGUYEN, HAN, DPM† | Provider ID: N/A |
| 26732 CROWN VALLEY PKWY STE 317 |
| MISSION VIEJO, CA 92691 | Effective as of 01-MAY-23 |

| Provider ID: N/A | 26991 CROWN VALLEY PKWY STE 100 |
| MISSION VIEJO, CA 92691 | Effective as of 01-OCT-21 |

| NOSRATI, SAM, DPM† | Provider ID: N/A |
| 26800 CROWN VALLEY PKWY STE 420 |
| MISSION VIEJO, CA 92691 | Effective as of 01-NOV-19 |

| SCHMALHAUS, MONTE, DPM | Provider ID: N/A |
| 26732 CROWN VALLEY PKWY STE 317 |
| MISSION VIEJO, CA 92691 | Effective as of 01-MAY-23 |

| NOSRATI, SAM, DPM† | Provider ID: N/A |
| 26691 PLAZA STE 201 |
| MISSION VIEJO, CA 92691 | Effective as of 01-OCT-21 |

| NGUYEN, HAN, DPM† | Provider ID: N/A |
| 26732 CROWN VALLEY PKWY STE 317 |
| MISSION VIEJO, CA 92691 | Effective as of 01-SEP-23 |

| Provider ID: N/A | 26991 CROWN VALLEY PKWY STE 100 |
| MISSION VIEJO, CA 92691 | Effective as of 01-OCT-21 |

| NOSRATI, SAM, DPM† | Provider ID: N/A |
| 26691 PLAZA STE 201 |
| MISSION VIEJO, CA 92691 | Effective as of 01-FEB-24 |

| SCHMALHAUS, MONTE, DPM | Provider ID: N/A |
| 26732 CROWN VALLEY PKWY STE 317 |
| MISSION VIEJO, CA 92691 | Effective as of 01-MAY-23 |

| NOSRATI, SAM, DPM† | Provider ID: N/A |
| 26691 PLAZA STE 201 |
| MISSION VIEJO, CA 92691 | Effective as of 01-OCT-21 |
MISSION VIEJO, CA 92691
Effective as of 01-FEB-24

SPENCER, ROBERT, DPM
Provider ID: N/A
27800 MEDICAL CENTER RD STE 110
MISSION VIEJO, CA 92691
Effective as of 01-JAN-16

PSYCHIATRY

ANOSHIVANI, ARDE, MD
Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

ANOSHIVANI, ARDE, MD
Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENESCH, ERIN, DO
Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

BENESCH, ERIN, DO
Provider ID: N/A
26051 ACERO STE 100
MISSION VIEJO, CA 92691
Effective as of 01-JUL-22

DENNIS, TSHEKEDI, MD
Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

DENNIS, TSHEKEDI, MD
Provider ID: N/A
26024 ACERO
MISSION VIEJO, CA 92691
Effective as of 01-AUG-22

FRANCIS, CATHARINE, PSYD
Provider ID: N/A
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MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

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MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

HAMILTON, JOANNE, PhD
Provider ID: N/A
29122 RANCHO VIEJO RD STE 102G
MISSION VIEJO, CA 92675
Effective as of 01-MAR-24

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Effective as of 01-MAR-24
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*Your PCP's provider network may have networked mental health providers. Please review the below list. You can contact these providers directly. Please note, some services may require your mental health provider to obtain prior authorization from Blue Shield, or the service may not be covered. For online access to the mental health provider network, please visit blueshieldca.com/fad.
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C1. 網絡內提供者清單

專科護理醫師

CHOU, WILLIAM, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

CHOU, WILLIAM, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-20

CHOU, WILLIAM, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

CHOU, WILLIAM, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

FENG, CHU-PEI, MD
Provider ID: N/A

27700 MEDICAL CENTER RD ST 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

FENG, CHU-PEI, MD
Provider ID: N/A

27700 MEDICAL CENTER RD ST 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD
Provider ID: N/A

27700 MEDICAL CENTER RD ST 2
MISSION VIEJO, CA 92691
Effective as of 01-JAN-17

FENG, CHU-PEI, MD
Provider ID: N/A

27700 MEDICAL CENTER RD ST 2
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LEE, SHARON, MD
Provider ID: N/A

27700 MEDICAL CENTER RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-21

LEE, SHARON, MD
Provider ID: N/A

27700 MEDICAL CENTER RD
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

LIU, GENE FU, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-AUG-21

LIU, GENE FU, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LIU, GENE FU, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-21

LIU, GENE FU, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

YOUNG, CAROLYN, MD
Provider ID: N/A

27799 MEDICAL CENTER RD
STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

YOUNG, CAROLYN, MD
Provider ID: N/A

27800 MEDICAL CENTER RD STE 160
MISSION VIEJO, CA 92691
Effective as of 01-SEP-19

RHEUMATOLOGY
### C1. 網絡內提供者清單

#### 專科護理醫師

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<tr>
<th>医师姓名</th>
<th>医师ID</th>
<th>地址</th>
<th>有效日期</th>
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<tr>
<td>CASTRO RUEDA, HERNAN, MD†</td>
<td>N/A</td>
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<td>DRIVER, CATHERINE, MD</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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Your PCP’s provider network may have a list of network providers for mental health services. Please refer to the list below. You can contact these providers directly. Please note that some services may require prior authorization from the mental health service provider to be covered by Blue Shield.

To online access the mental health provider list, please visit blueshieldca.com/fad.
<table>
<thead>
<tr>
<th>Provider ID</th>
<th>Name</th>
<th>Address</th>
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<td>N/A</td>
<td>BACON, LOUISE, MD</td>
<td>26732 CROWN VALLEY PKWY STE 351 MISSION VIEJO, CA 92691</td>
<td>01-OCT-23</td>
</tr>
<tr>
<td>N/A</td>
<td>BACON, LOUISE, MD</td>
<td>27799 MEDICAL CENTER RD STE 440 MISSION VIEJO, CA 92691</td>
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<td>27799 MEDICAL CENTER RD STE 440 MISSION VIEJO, CA 92691</td>
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<td>SHAVER, JOHN, MD²</td>
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<td>26732 CROWN VALLEY PKWY STE 541</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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<tr>
<td>NWAGWU, CHIEDOZIE, MD †</td>
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C1. 網絡內提供者清單
專科護理醫師

MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-MAY-21

TSIMPAS, ASTERIOS, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 541
MISSION VIEJO, CA 92691
Effective as of 01-SEP-23

SURGERY ORTHOPEDIC

AMINIAN, AFSHIN, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-JUN-16

BURDI, MICHAEL, MD
Provider ID: N/A
26401 CROWN VALLEY PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-14

CHEN, JAMES, MD²
Provider ID: N/A
26401 CROWN VALLEY PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-APR-12
C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-SEP-22

CHEN, JAMES, MD†
Provider ID: N/A
26401 CROWN VALLEY PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-SEP-22

CLAVERIA, RICHARD, MD
Provider ID: N/A
26921 CROWN VALLEY PKWY STE 201
MISSION VIEJO, CA 92691
Effective as of 01-MAR-20

DOBYNS, JEFFREY, MD†
Provider ID: N/A
25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-SEP-15

DUGGAN, DANIEL, DO†
Provider ID: N/A
27725 SANTA MARGARITA PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-NOV-20

DUGGAN, DANIEL, DO†
Provider ID: N/A
27725 SANTA MARGARITA PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-DEC-23

FITZPATRICK, MICHAEL, MD†
Provider ID: N/A
26730 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-SEP-10

FITZPATRICK, MICHAEL, MD†
Provider ID: N/A
26730 CROWN VALLEY PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JUL-07

GARDNER, STEPHEN, MD
Provider ID: N/A
26401 CROWN VALLEY PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-DEC-14

GUERRERO, EVAN, MD†
Provider ID: N/A
26401 CROWN VALLEY PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-NOV-21
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

HANJAN, TIVA, MD†
Provider ID: N/A

26401 CROWN VALLEY PKWY STE 101
MISSION VIEJO, CA 92691
Effective as of 01-FEB-18

HUO, KEUN-HENG, MD†
Provider ID: N/A

27725 SANTA MARGARITA PKWY STE 100
MISSION VIEJO, CA 92691
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†
Provider ID: N/A

27725 SANTA MARGARITA PKWY STE 100
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HANJAN, TIVA, MD†
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GVOZDYEV, BORYS, MD†
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Effective as of 01-AUG-20

LALONDE, FRANCOIS, MD†
Provider ID: N/A

25982 PALA STE 230
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Effective as of 01-JUL-23

LALONDE, FRANCOIS, MD†
Provider ID: N/A

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Effective as of 01-JUL-23

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Effective as of 01-JAN-17

LALONDE, FRANCOIS, MD†
Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-APR-08

MAJUMDAR, ADITI, MD†
Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MAJUMDAR, ADITI, MD†
Provider ID: N/A

25982 PALA STE 230
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

MARANGI, KENT, MD†
Provider ID: N/A

26401 CROWN VALLEY PKWY STE 101

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*PCP*: Primary Care Provider

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#### 專科護理醫師

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<th>名稱</th>
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<td>PORAT, SHAROUN, MD‡</td>
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<td>ROSENFELD, SAMUEL, MD‡</td>
<td>N/A</td>
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<td>SCHLECHTER, JOHN, DO‡</td>
<td>N/A</td>
<td>25982 PALA STE 230</td>
<td>MISSION VIEJO, CA</td>
<td>92691</td>
<td>Effective as of 01-APR-08</td>
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* 網絡內提供者清單

若您的 PCP (Primary Care Provider) 的醫學人員可能有自己的網絡內精神健康服務提供者。請查看下方的清單。您可直接聯繫這些提供者。請留意，某些服務可能需要精神健康服務提供者的 Blue Shield 先前授權，然後才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

LEE, MICHAEL, MD
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 410
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

LEE, MICHAEL, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 585
MISSION VIEJO, CA 92691
Effective as of 01-MAY-19

FOWLER, AARON, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

FOWLER, AARON, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

SAFFARZADEH, AREO, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

SAFFARZADEH, AREO, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

SAFFARZADEH, AREO, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-20

TANG, TAYLOR, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

TANG, TAYLOR, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

THIBAULT, WILLIAM, MD
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 461
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21
C1. 網絡內提供者清單
專科護理醫師

THIBAULT, WILLIAM, MD†
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-21

THIBAULT, WILLIAM, MD†
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

THIBAULT, WILLIAM, MD†
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-19

WON, EUGENE, MD†
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

WON, EUGENE, MD†
Provider ID: N/A
26732 CROWN VALLEY PKWY STE 226
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22

UROLOGY

BUI, DON, MD†
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAR-23

BUI, DON, MD†
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

BUI, DON, MD†
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-22
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-OCT-23

CHAMBERLIN, DAVID, MD
Provider ID: N/A
егодняшний документ

ELKHOURY, FUAD, MD
Provider ID: N/A

HO, TAMMY, MD
Provider ID: N/A

KIM, MOSES, MD
Provider ID: N/A

ELKHOURY, FUAD, MD
Provider ID: N/A

HO, TAMMY, MD
Provider ID: N/A

KIM, MOSES, MD
Provider ID: N/A

ELKHOURY, FUAD, MD
Provider ID: N/A

HO, TAMMY, MD
Provider ID: N/A

KIM, MOSES, MD
Provider ID: N/A

ELKHOURY, FUAD, MD
Provider ID: N/A

HO, TAMMY, MD
Provider ID: N/A

KIM, MOSES, MD
Provider ID: N/A

ELKHOURY, FUAD, MD
Provider ID: N/A

HO, TAMMY, MD
Provider ID: N/A

KIM, MOSES, MD
Provider ID: N/A

ELKHOURY, FUAD, MD
Provider ID: N/A

HO, TAMMY, MD
Provider ID: N/A

KIM, MOSES, MD
Provider ID: N/A
KIM, MOSES, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

KIM, MOSES, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

KIM, MOSES, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-FEB-23

MEAGLIA, JAMES, MD
Provider ID: N/A
26800 CROWN VALLEY PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

MEAGLIA, JAMES, MD
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26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

MEAGLIA, JAMES, MD
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26691 PLAZA STE 120
MISSION VIEJO, CA 92691
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MEAGLIA, JAMES, MD
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26691 PLAZA STE 120
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MEAGLIA, JAMES, MD
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26800 CROWN VALLEY PKWY STE 340
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MEAGLIA, JAMES, MD
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26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

MEAGLIA, JAMES, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
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MEAGLIA, JAMES, MD
Provider ID: N/A
26691 PLAZA STE 120
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Effective as of 01-JUN-18

NAKAMURA, LEAH, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
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26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23
C1. 網絡內提供者清單
專科護理醫師

NAKAMURA, LEAH, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

NAKAMURA, LEAH, MD
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26991 CROWN VALLEY
PKWY STE 200
MISSION VIEJO, CA 92691
Effective as of 01-JAN-23

NAKAMURA, LEAH, MD
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

PASIN, ERIK, MD
Provider ID: N/A
26800 CROWN VALLEY
PKWY STE 445
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

RANDALL, JOSH, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-APR-23

RANDALL, JOSH, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-22

RANDALL, JOSH, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

RANDALL, JOSH, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SHOURESHI, POONE, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-24

SINGH, KARAN, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-MAY-23

SINGH, KARAN, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SINGH, KARAN, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SINGH, KARAN, MD
Provider ID: N/A
26691 PLAZA STE 120
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Effective as of 01-JUN-22

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Provider ID: N/A
26691 PLAZA STE 120
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26691 PLAZA STE 120
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Effective as of 01-MAY-23

SINGH, KARAN, MD
Provider ID: N/A
26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22
C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-MAR-23

SINGH, KARAN, MD†
Provider ID: N/A
𝑏  26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-JUN-22

SINGH, KARAN, MD†
Provider ID: N/A
𝑏  26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-SEP-18

SINGH, KARAN, MD†
Provider ID: N/A
𝑏  26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPITZ, AARON, MD†
Provider ID: N/A
𝑏  26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-DEC-19

SPITZ, AARON, MD†
Provider ID: N/A
𝑏  26800 CROWN VALLEY
PKWY STE 340
MISSION VIEJO, CA 92691
Effective as of 01-JUN-18

SPITZ, AARON, MD
Provider ID: N/A
𝑏  26691 PLAZA STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-23

SU, DANIEL, MD
Provider ID: N/A
𝑏  26991 CROWN VALLEY
PKWY STE 120
MISSION VIEJO, CA 92691
Effective as of 01-OCT-18

STEPHANY, HEIDI, MD
Provider ID: N/A
𝑏  26691 PLAZA STE 130
MISSION VIEJO, CA 92691
Effective as of 01-JAN-24

Provided by: Blue Shield of California

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<td>01-OCT-23</td>
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</table>
C1. 網絡內提供者清單

**ANGLER IMMUNOLOGY**

**IMAM, ASIF, MD**
Provider ID: N/A
40680 CALIFORNIA OAKS RD STE 1A
MURRIETA, CA 92562
Effective as of 01-MAR-23

**ANESTHESIOLOGY PAIN MANAGEMENT**

**AUSTIN, MARK, MD†**
Provider ID: N/A
25495 MEDICAL CENTER DR STE 102
MURRIETA, CA 92562
Effective as of 01-JUL-23

**BETTS, ANDRES, MD**
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

**KELLING, JONATHAN, MD†**
Provider ID: N/A
38860 SKY CANYON DR BLDG A
MURRIETA, CA 92563
Effective as of 01-JUL-22

**CARDIOVASCULAR DISEASE**

**ALTURJUMAN, AHMAD, MD†**
Provider ID: N/A
29995 TECHNOLOGY DR STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

**MESSENGER, BRADLEY, MD†**
Provider ID: N/A
39755 MURRIETA HOT SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-20

**OSHODI, GANIYU, MD†**
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUL-23

**KELLING, JONATHAN, MD†**
Provider ID: N/A
38860 SKY CANYON DR BLDG A
MURRIETA, CA 92563
Effective as of 01-MAR-23

**KHATIBI, NIKAN, DO†**
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24910 LAS BRISAS RD STE 121
MURRIETA, CA 92562
Effective as of 01-JUL-23

**BETTS, ANDRES, MD**
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JUL-23
ALTURJUMAN, AHMAD, MD†
Provider ID: N/A
29995 TECHNOLOGY DR
STE 302
MURRIETA, CA 92563
Effective as of 01-MAR-22

ALTURJUMAN, AHMAD, MD†
Provider ID: N/A
40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-NOV-22

AMIN, JATIN, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-20

ATTIA, NADER, DO†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-21

ATTIA, NADER, DO†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-20

ATTIA, NADER, DO†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-FEB-17

BISWAS, MIMI, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-20

BISWAS, MIMI, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-JUL-23

BISWAS, MIMI, MD†
Provider ID: N/A
40700 CALIFORNIA OAKS
RD STE 208
MURRIETA, CA 92562
Effective as of 01-JAN-21
C1. 網絡內提供者清單

專科護理醫師

PAREKH, NIRAJ, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAR-20

PATANKAR, KAUSTUBH, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAR-20

PAREKH, NIRAJ, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-AUG-18

PAREKH, NIRAJ, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAR-20

PAREKH, NIRAJ, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-21

PAREKH, NIRAJ, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-20

SEAMAN, CHRISTOPHER, MD†
Provider ID: N/A
39755 MURRIETA HOT
SPRINGS RD BLDG G
MURRIETA, CA 92563
Teleservice
Effective as of 01-MAY-20

CERTIFIED NURSE
PRACTITIONER

ANDERSON, TRACEY, NP†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20

ANDERSON, TRACEY, NP†
Provider ID: N/A
25150 HANCOCK AVE STE
210
MURRIETA, CA 92562
Effective as of 01-FEB-20
### C1. 網絡內提供者清單

**专科護理醫師**

<table>
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<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Address</th>
<th>Effective from</th>
</tr>
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<td><strong>BARBOZA, GEORGE, NP</strong></td>
<td>N/A</td>
<td>39755 MURRIETA HOT SPRINGS RD MURRIETA, CA 92563</td>
<td>as of 01-DEC-20</td>
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<td><strong>BARBOZA, GEORGE, NP</strong></td>
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<td>as of 01-SEP-22</td>
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<td><strong>BEDFORD, RONALD, NP</strong></td>
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<td>25405 HANCOCK AVE STE 200 MURRIETA, CA 92562</td>
<td>as of 01-MAY-22</td>
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<td>25405 HANCOCK AVE STE 200 MURRIETA, CA 92562</td>
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<td><strong>CAMPBELL, AMBER, NP</strong></td>
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C1. 網絡內提供者清單

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<td>SICKELS, JENNIFER, NP</td>
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<td>VIERA, LIANA, NP↑</td>
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<td>KHERADMAND, SHIVA, DO↑</td>
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C1. 網絡內提供者清單

網絡內提供者清單

MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†
Provider ID: N/A
25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†
Provider ID: N/A
25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-MAY-22

KHERADMAND, SHIVA, DO†
Provider ID: N/A
25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-MAY-23

KOUPAIE, JAFAR, MD
Provider ID: N/A
25495 MEDICAL CENTER DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-22

LEE, HELEN, MD†
Provider ID: N/A
25495 MEDICAL CENTER DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-22

LEE, HELEN, MD†
Provider ID: N/A
25495 MEDICAL CENTER DR STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-23

MUNYON, THOMAS, MD†
Provider ID: N/A
25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-NOV-21

ROSHDIEH, BABAK, MD†
Provider ID: N/A
25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-23

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C1. 網絡內提供者清單

SAIED, NAGI, MD
Provider ID: N/A
25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-JUL-23

SHAPIRO, STEVEN, MD
Provider ID: N/A
40663 MURRIETA HOT SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-MAR-24

VENVAT, ARUN, MD
Provider ID: N/A
25495 MEDICAL CENTER DR STE 200
MURRIETA, CA 92562
Effective as of 01-MAR-24

SAIED, NAGI, MD
Provider ID: N/A
25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-23

SIRICHOTIRATANA, MELISSA, MD
Provider ID: N/A
25405 HANCOCK AVE STE 200
MURRIETA, CA 92562
Teleservice
Effective as of 01-JUL-23

ENDOCRINOLOGY
METABOLISM DIABETES

BUI, AMY-VAN, MD
Provider ID: N/A
39765 DATE ST STE 102
MURRIETA, CA 92563
Effective as of 01-NOV-13

FAMILY PRACTICE

THIELE, JENS, MD
Provider ID: N/A
25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562
Effective as of 01-OCT-18

GASTROENTEROLOGY

ANYADIKE, CYRIL, MD
Provider ID: N/A
25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562
Effective as of 01-OCT-18

VENKAT, ARUN, MD
Provider ID: N/A
25495 MEDICAL CENTER DR STE 200
MURRIETA, CA 92562
Effective as of 01-MAR-24

TAHERI, DANIEL, MD
Provider ID: N/A
40663 MURRIETA HOT SPRINGS RD STE C3
MURRIETA, CA 92562
Teleservice
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BUI, AMY-VAN, MD
Provider ID: N/A
39765 DATE ST STE 102
MURRIETA, CA 92563
Effective as of 01-NOV-13

MEMON, TALHA, MD
Provider ID: N/A
39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-OCT-18

FARZIN, ABDUL, MD
Provider ID: N/A
40690 CALIFORNIA OAKS RD STE A
MURRIETA, CA 92562
Effective as of 01-MAR-24

THIELE, JENS, MD
Provider ID: N/A
25495 MEDICAL CENTER DR STE 302
MURRIETA, CA 92562
Effective as of 01-NOV-11

SHAPIRO, STEVEN, MD
Provider ID: N/A
40663 MURRIETA HOT SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-MAR-24
C1. 網絡內提供者清單

專科護理醫師

MURRIETA, CA 92562
Effective as of 01-SEP-15

ANYADIKE, CYRIL, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-JUL-23

ANYADIKE, CYRIL, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-FEB-18

ANYADIKE, CYRIL, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Effective as of 01-OCT-07

ARDIGO, GREGORY, MD†
Provider ID: N/A
40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562
Effective as of 01-JUL-23

ARDIGO, GREGORY, MD†
Provider ID: N/A
40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562
Effective as of 01-JUL-15

DINH, JACK, MD†
Provider ID: N/A
40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562
Effective as of 01-AUG-20

DINH, JACK, MD†
Provider ID: N/A
40404 CALIFORNIA OAKS
RD STE C
MURRIETA, CA 92562
Effective as of 01-DEC-08

FAN, ROBERT, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Teleservice
Effective as of 01-JUL-23

FAN, ROBERT, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Teleservice
Effective as of 01-APR-20

FAN, ROBERT, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 302
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAR-21

FAN, ROBERT, MD†
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25495 MEDICAL CENTER
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Teleservice
Effective as of 01-AUG-15

FLANNERY, CHRISTOPHER,
MD
Provider ID: N/A
40663 MURRIETA HOT
SPRINGS RD STE C1
MURRIETA, CA 92562
Effective as of 01-JUL-15

FLANNERY, CHRISTOPHER,
MD
Provider ID: N/A
40663 MURRIETA HOT
SPRINGS RD STE C1
MURRIETA, CA 92562
Effective as of 01-APR-23

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專科護理醫師

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<td>ANDREY, JEFFREY, MD</td>
<td>N/A</td>
<td>25405 HANCOCK AVE STE 101</td>
<td>MURRIETA, CA 92562</td>
<td>Effective as of 01-JUL-23</td>
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<td>BASERI, BABAK, MD</td>
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<td>MARON, PHILIP, MD</td>
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<tr>
<td>MOST, CAROLE, MD</td>
<td>N/A</td>
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<td>MURRIETA, CA 92562</td>
<td>Effective as of 01-OCT-23</td>
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<td>MOST, CAROLE, MD</td>
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<td>25405 HANCOCK AVE STE 211</td>
<td>MURRIETA, CA 92562</td>
<td>Effective as of 01-OCT-23</td>
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</tbody>
</table>

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

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<thead>
<tr>
<th>專科護理醫師</th>
<th>Provider ID</th>
<th>Address</th>
<th>Effective as of</th>
</tr>
</thead>
<tbody>
<tr>
<td>MOST, CAROLE, MD†</td>
<td>N/A</td>
<td>25405 HANCOCK AVE STE 211</td>
<td>01-SEP-18</td>
</tr>
<tr>
<td>SARWARI, NAWID, MD</td>
<td>N/A</td>
<td>25405 HANCOCK AVE STE 101</td>
<td>01-SEP-18</td>
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<tr>
<td>SARWARI, NAWID, MD</td>
<td>N/A</td>
<td>25405 HANCOCK AVE STE 101</td>
<td>01-SEP-18</td>
</tr>
<tr>
<td>RAVINDRANATHAN, MEERA, MD</td>
<td>N/A</td>
<td>25405 HANCOCK AVE STE 211</td>
<td>01-SEP-18</td>
</tr>
<tr>
<td>RAVINDRANATHAN, MEERA, MD</td>
<td>N/A</td>
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<tr>
<td>TSANG, WALTER, MD†</td>
<td>N/A</td>
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<tr>
<td>TSANG, WALTER, MD†</td>
<td>N/A</td>
<td>25404 HANCOCK AVE STE 211</td>
<td>01-FEB-20</td>
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<tr>
<td>TSANG, WALTER, MD†</td>
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<td>N/A</td>
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<td>01-FEB-20</td>
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<tr>
<td>WANG, AMY, MD†</td>
<td>N/A</td>
<td>25405 HANCOCK AVE STE 211</td>
<td>01-JUN-21</td>
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<tr>
<td>WANG, AMY, MD†</td>
<td>N/A</td>
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<td>01-JUN-21</td>
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<td>WANG, AMY, MD†</td>
<td>N/A</td>
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<td>01-JUN-21</td>
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<td>WANG, AMY, MD†</td>
<td>N/A</td>
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<td>01-JUN-21</td>
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<tr>
<td>HARFOUCH, CHAWKI, MD†</td>
<td>N/A</td>
<td>25404 HANCOCK AVE STE 211</td>
<td>01-JUN-21</td>
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C1. 網絡內提供者清單

### 專科護理醫師

- **GAGLANI, RAHUL, MD**
  - Provider ID: N/A
  - Address: 39755 MURRIETA HOT SPRINGS RD BLDG G, MURRIETA, CA 92563
  - Effective as of 01-APR-17

- **MESSENGER, BRADLEY, MD**
  - Provider ID: N/A
  - Address: 39755 MURRIETA HOT SPRINGS RD BLDG G, MURRIETA, CA 92563
  - Effective as of 01-FEB-22

- **MESSENGER, BRADLEY, MD**
  - Provider ID: N/A
  - Address: 39755 MURRIETA HOT SPRINGS RD BLDG G, MURRIETA, CA 92563
  - Effective as of 01-FEB-22

- **PARSI, HOOMAN, MD**
  - Provider ID: N/A
  - Address: 25405 HANCOCK AVE STE 101, MURRIETA, CA 92562
  - Effective as of 01-JAN-19

- **NUNES, SUNITHA, MD**
  - Provider ID: N/A
  - Address: 39755 DATE ST STE 101, MURRIETA, CA 92563
  - Effective as of 01-FEB-22

- **TALANKI, VARUN, MD**
  - Provider ID: N/A
  - Address: 25495 MEDICAL CENTER DR STE 204, MURRIETA, CA 92562
  - Effective as of 01-DEC-22

- **UDDIN, MOHAMMAD, MD**
  - Provider ID: N/A
  - Address: 24910 LAS BRISAS RD STE 108, MURRIETA, CA 92562
  - Effective as of 01-JUL-20

### NEUROLOGY

- **ALVAREZ, PAMELA, MD**
  - Provider ID: N/A
  - Address: 24910 LAS BRISAS RD STE 115, MURRIETA, CA 92562
  - Effective as of 01-MAY-14

- **ALVAREZ, PAMELA, MD**
  - Provider ID: N/A
  - Address: 24910 LAS BRISAS RD STE 115, MURRIETA, CA 92562
  - Effective as of 01-MAR-15

- **UDDIN, MOHAMMAD, MD**
  - Provider ID: N/A
  - Address: 24910 LAS BRISAS RD STE 108, MURRIETA, CA 92562
  - Effective as of 01-JUL-20

### MEDICAL ONCOLOGY

- **PARK, HAHMOON, MD**
  - Provider ID: N/A
  - Address: 25405 HANCOCK AVE STE 101, MURRIETA, CA 92562
  - Effective as of 01-JUL-20

### MATERNAL AND FETAL MEDICINE

- **BRAR, HARINDER, MD**
  - Provider ID: N/A
  - Address: 25109 JEFFERSON AVE STE 210, MURRIETA, CA 92562
  - Effective as of 01-SEP-22

### NEPHROLOGY

- **UDDIN, MOHAMMAD, MD**
  - Provider ID: N/A
  - Address: 24910 LAS BRISAS RD STE 108, MURRIETA, CA 92562
  - Effective as of 01-JUL-20

---

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C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A

UDDIN, MOHAMMAD, MD
Provider ID: N/A
24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-JUL-20

UDDIN, MOHAMMAD, MD²
Provider ID: N/A
24910 LAS BRISAS RD STE 108
MURRIETA, CA 92562
Effective as of 01-AUG-20

NEUROLOGY

NUNE, SUNITHA, MD
Provider ID: N/A
39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-APR-21

OBSTETRICS / GYNECOLOGY

ANDERSEN, MICHAEL, MD
Provider ID: N/A
24619 WASHINGTON AVE STE 104
MURRIETA, CA 92562
Effective as of 01-JAN-21

BINDER, PRATIBHA, MD
Provider ID: N/A
25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-JUL-21

BRAR, HARBINDER, MD
Provider ID: N/A
25109 JEFFERSON AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-23

CHIODI, MARTINA, MD
Provider ID: N/A
24910 LAS BRISAS RD STE 113
MURRIETA, CA 92562
Effective as of 01-MAR-20

DIMMETTE, PATTIE, MD
Provider ID: N/A
25405 HANCOCK AVE STE 203
MURRIETA, CA 92562
Effective as of 01-SEP-23

ELFELT, TIMOTHY, MD
Provider ID: N/A
25460 MEDICAL CENTER DR STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-20
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<td>01-MAR-20</td>
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C1. 网络内提供者清单

专科护理医师

DR STE 100
MURRIETA, CA 92562
Teleservice
Effective as of 01-AUG-10

OCCUPATIONAL THERAPIST

BAST, SIDNEY, OT
Provider ID: N/A
24671 MONROE AVE STE 101
MURRIETA, CA 92562
Effective as of 01-OCT-19

BAST, SIDNEY, OT
Provider ID: N/A
24671 MONROE AVE STE 101
MURRIETA, CA 92562
Effective as of 01-OCT-19

CATIPON, GABRIELLE, OT
Provider ID: N/A
24671 MONROE AVE STE C101
MURRIETA, CA 92562
Effective as of 01-MAY-23

CATIPON, GABRIELLE, OT
Provider ID: N/A
24671 MONROE AVE STE C101
MURRIETA, CA 92562
Effective as of 01-MAY-23

DIMEGLIO, PAUL, OT
Provider ID: N/A
24671 MONROE AVE STE 101
MURRIETA, CA 92562
Effective as of 01-FEB-21

DIMEGLIO, PAUL, OT
Provider ID: N/A
24671 MONROE AVE STE 101
MURRIETA, CA 92562
Effective as of 01-FEB-21

STOTLER, APRIL, OT
Provider ID: N/A
24671 MONROE AVE STE C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

STOTLER, APRIL, OT
Provider ID: N/A
24671 MONROE AVE STE C201
MURRIETA, CA 92562
Effective as of 01-JAN-24

ZECHA, RICHARD, OT
Provider ID: N/A
24671 MONROE AVE STE 101 BLDG C
MURRIETA, CA 92562
Effective as of 01-JAN-21

ZECHA, RICHARD, OT
Provider ID: N/A
24671 MONROE AVE STE 101 BLDG C
MURRIETA, CA 92562
Effective as of 01-JAN-21

OPHTHALMOLOGY

ABBoud, Jean-Paul, MD
Provider ID: N/A
40700 CALIFORNIA OAKS RD STE 106
MURRIETA, CA 92562
Effective as of 01-MAR-18

CARLSON, JOHN, MD
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CARLSON, JOHN, MD
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHAWLA, Anuj, MD
Provider ID: N/A
40690 CALIFORNIA OAKS RD STE B
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHIN, Eric, MD
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JUL-19

CHIN, Eric, MD
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHIN, Eric, MD
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-FEB-21

CHIN, Eric, MD
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JAN-22
C1. 網絡內提供者清單

專科護理醫師

CHIN, ERIC, MD†
Provider ID: N/A
していました。
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JUN-23

CHOW, JASON, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-FEB-24

CHOW, JASON, MD†
Provider ID: N/A
25460 MEDICAL CENTER DR STE 103
MURRIETA, CA 92562
Effective as of 01-JUL-23

CHOW, JASON, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
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CHOW, JASON, MD†
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25395 HANCOCK AVE STE 100
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Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-SEP-22

CULOTTA, ANTHONY, MD†
Provider ID: N/A
40690 CALIFORNIA OAKS RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-SEP-18

DONALDSON, JARED, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-MAY-21

DONALDSON, JARED, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-MAY-21

DONALDSON, JARED, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JUL-21

DONALDSON, JARED, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JUL-21

DONALDSON, JARED, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JAN-23

DONALDSON, JARED, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-DEC-22

DONALDSON, JARED, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-SEP-22

GOLLOGLY, HEIDRUN, MD†
Provider ID: N/A
40690 CALIFORNIA OAKS RD STE B
MURRIETA, CA 92562
Teleservice
Effective as of 01-MAY-21
<table>
<thead>
<tr>
<th>医生姓名</th>
<th>医生ID</th>
<th>医院地址</th>
<th>开始日期</th>
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<tr>
<td>JOSEPH, JEFFREY, MD</td>
<td>N/A</td>
<td>25460 MEDICAL CENTER DR STE 103 MURRIETA, CA 92562</td>
<td>01-OCT-17</td>
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<tr>
<td>JOSEPH, JEFFREY, MD</td>
<td>N/A</td>
<td>25460 MEDICAL CENTER DR STE 103 MURRIETA, CA 92562</td>
<td>01-JUL-17</td>
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<tr>
<td>JOSEPH, JEFFREY, MD</td>
<td>N/A</td>
<td>25395 HANCOCK AVE STE 100 MURRIETA, CA 92562</td>
<td>01-DEC-17</td>
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<td>JOSEPH, JEFFREY, MD</td>
<td>N/A</td>
<td>25395 HANCOCK AVE STE 100 MURRIETA, CA 92562</td>
<td>01-AUG-17</td>
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<tr>
<td>JOSEPH, JEFFREY, MD</td>
<td>N/A</td>
<td>25395 HANCOCK AVE STE 100 MURRIETA, CA 92562</td>
<td>01-FEB-17</td>
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您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
Effective as of 01-JAN-22

PHILLIPS, BARRATT, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-18

SORENSON, ROBERT, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JAN-22

SORENSON, ROBERT, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JAN-22

VIDOR, IRA, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-DEC-21

OPTOMETRIST

ARCHIBALD, JOHN, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JAN-22

ARCHIBALD, JOHN, OD†
Provider ID: N/A
25460 MEDICAL CENTER DR STE 103
MURRIETA, CA 92562
Effective as of 01-DEC-23

COLEMAN, BROOKE, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JAN-22

COOPET, MICHAEL, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-20

COOPER, MICHAEL, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-20

COOPER, MICHAEL, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JAN-22

EVANS, RYAN, OD
Provider ID: N/A
40700 CALIFORNIA OAKS RD STE 106
MURRIETA, CA 92562
Effective as of 01-SEP-22

LARSON, BRETT, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JUL-23

LARSON, BRETT, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-FEB-22

LARSON, BRETT, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-AUG-18

LARSON, BRETT, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JUL-19

MC DIARMID, JOHN, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-JUL-23

MC DIARMID, JOHN, OD†
Provider ID: N/A
25395 HANCOCK AVE STE 100
MURRIETA, CA 92562
Effective as of 01-SEP-22

SCOTT, JEFFREY, OD†
Provider ID: N/A
40690 CALIFORNIA OAKS RD STE B
MURRIETA, CA 92562
Effective as of 01-JAN-23
您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD‡
Provider ID: N/A
25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

ELLINI, AHMAD, MD‡
Provider ID: N/A
25470 MEDICAL CENTER
DR STE 201
MURRIETA, CA 92562
Effective as of 01-APR-18

PHYSICIANS ASSISTANT
ARROYO, ARIANNA, PA
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-JUN-23

ARROYO, ARIANNA, PA
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-JUN-23

KAUFMAN, TIFFANY, PA†
Provider ID: N/A
24910 LAS BRISAS RD STE 105
MURRIETA, CA 92562
Effective as of 01-NOV-16

LANCASTER, MICHELLE, PA†
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LANCASTER, MICHELLE, PA†
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-22

LEE, WILLIAM, PA†
Provider ID: N/A
C1. 網絡內提供者清單

專科護理醫師

LEE, WILLIAM, PA†
Provider ID: N/A
40663 MURRIETA HOT SPRINGS RD STE C3
MURRIETA, CA 92562
Effective as of 01-APR-21

LIN, RAY, PA†
Provider ID: N/A
25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-AUG-17

LUCATERO, JENNIFER, PA†
Provider ID: N/A
25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-JAN-18

ST JULES, JESSICA, PA†
Provider ID: N/A
25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-AUG-17

NEALEIGH, NATALIE, PA†
Provider ID: N/A
25495 MEDICAL CENTER DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-17

QUEROL, CYRUS, PA
Provider ID: N/A
28078 BAXTER RD STE 312
MURRIETA, CA 92563
Effective as of 01-APR-24

QUISMORIO, DEMETRIO, PA†
Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-NOV-20

QUISMORIO, DEMETRIO, PA†
Provider ID: N/A
28078 BAXTER RD STE 330
MURRIETA, CA 92563
Effective as of 01-DEC-16

RUIZ-FLORES, ROSE, PA
Provider ID: N/A
24703 MONROE AVE MURRIETA, CA 92562
Effective as of 01-SEP-23

VALENTA, CAYLIE, PA†
Provider ID: N/A
40700 CALIFORNIA OAKS RD STE 208
MURRIETA, CA 92562
Effective as of 01-JAN-21

WOOLEY, LAURA, PA†
Provider ID: N/A
25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-JAN-24

PODIATRIST

EVANS, RICHARD, DPM
Provider ID: N/A
39755 MURRIETA HOT SPRINGS RD
MURRIETA, CA 92562
C1. 網絡內提供者清單

專科護理醫師

EVANS, RICHARD, DPM
Provider ID: N/A
SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-MAR-15

EVANS, RICHARD, DPM
Provider ID: N/A
39755 MURRIETA HOT SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-24

NGUYEN, THO, DPM
Provider ID: N/A
24640 JEFFERSON AVE STE 109
MURRIETA, CA 92562
Effective as of 01-APR-06

EVANS, RICHARD, DPM
Provider ID: N/A
39755 MURRIETA HOT SPRINGS RD STE D130
MURRIETA, CA 92563
Effective as of 01-APR-24

NGUYEN, THO, DPM
Provider ID: N/A
24640 JEFFERSON AVE STE 109
MURRIETA, CA 92562
Effective as of 01-AUG-16

NGUYEN, THO, DPM
Provider ID: N/A
24640 JEFFERSON AVE STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-16

SCOTT, SUSAN, DPM
Provider ID: N/A
24640 JEFFERSON AVE STE 109
MURRIETA, CA 92562
Effective as of 01-MAY-21

SHIN, CHRISTOPHER, DPM
Provider ID: N/A
24640 JEFFERSON AVE STE 109
MURRIETA, CA 92562
Effective as of 01-SEP-22

TRANSFIGURACION SHIN, CHRISTIANNE, DPM
Provider ID: N/A
24640 JEFFERSON AVE STE 109
MURRIETA, CA 92562
Effective as of 01-DEC-17

PULMONARY DISEASES

HADDADIN, HASSAN, MD
Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-JUL-22

HADDADIN, HASSAN, MD
Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-APR-22

HADDADIN, HASSAN, MD
Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-APR-22

HADDADIN, HASSAN, MD
Provider ID: N/A
C1. 網絡內提供者清單
專科護理醫師

HENNINGER, DELMER, MD
Provider ID: N/A
39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-JUL-23

HENNINGER, DELMER, MD
Provider ID: N/A
39755 DATE ST STE 101
MURRIETA, CA 92563
Effective as of 01-SEP-09

KUMAR, AVNEE, MD
Provider ID: N/A
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Effective as of 01-AUG-22

SIEN, STEFAN, DO†
Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-FEB-15

SIEN, STEFAN, DO†
Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-NOV-12

SURI, RAJAT, MD†
Provider ID: N/A
25500 MEDICAL CENTER DR

MURRIETA, CA 92562
Effective as of 01-JUN-21

VEGA, RICARDO, MD†
Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†
Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

VEGA, RICARDO, MD†
Provider ID: N/A
28078 BAXTER RD STE 324
MURRIETA, CA 92563
Effective as of 01-AUG-22

PATEL, NIKHIL, MD†
Provider ID: N/A
25485 MEDICAL CENTER DR STE 106
MURRIETA, CA 92562
Effective as of 01-AUG-22

PATEL, NIKHIL, MD†
Provider ID: N/A
25485 MEDICAL CENTER DR STE 106
MURRIETA, CA 92562
Effective as of 01-JAN-24

PATEL, NIKHIL, MD†
Provider ID: N/A
25485 MEDICAL CENTER DR STE 106
MURRIETA, CA 92562
Effective as of 01-FEB-22

BLUCHER, CHERI, RDN
Provider ID: N/A
29970 TECHNOLOGY DR STE 105D
MURRIETA, CA 92563
Effective as of 01-JUN-21

BRENDECKE, LORIE, RDN
Provider ID: N/A
29970 TECHNOLOGY DR STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN
Provider ID: N/A
29970 TECHNOLOGY DR STE 105D
MURRIETA, CA 92563
Effective as of 01-JUL-22

BRENDECKE, LORIE, RDN
Provider ID: N/A
29970 TECHNOLOGY DR STE 105D
MURRIETA, CA 92563
Effective as of 01-FEB-22
C1. 網絡內提供者清單

專科護理醫師

JACKSON, ALLYSON, RD  
Provider ID: N/A  
29970 TECHNOLOGY DR STE 105D  
MURRIETA, CA 92563  
Effective as of 01-JUL-21

ROBERTS, LISA, RD  
Provider ID: N/A  
29970 TECHNOLOGY DR STE 105D  
MURRIETA, CA 92563  
Effective as of 01-JUN-21

WAYNE, DIANE, RD  
Provider ID: N/A  
29970 TECHNOLOGY DR STE 105D  
MURRIETA, CA 92563  
Teleservice  
Effective as of 01-DEC-23

WAYNE, DIANE, RD  
Provider ID: N/A  
29970 TECHNOLOGY DR STE 105D  
MURRIETA, CA 92563  
Teleservice  
Effective as of 01-DEC-23

REGISTERED PHYSICAL THERAPIST

AGENA, CYAN, PT†  
Provider ID: N/A  
25136 HANCOCK AVE STE A  
MURRIETA, CA 92562  
Effective as of 01-MAY-22

ALEXANDER, AUSTIN, PT  
Provider ID: N/A  
25495 MEDICAL CENTER DR STE 304  
MURRIETA, CA 92562  
Effective as of 01-DEC-20

ALY, DILYANA, PT†  
Provider ID: N/A  
27722 CLINTON KEITH RD STE B-C  
MURRIETA, CA 92562  
Effective as of 01-JUL-19

ATKINS, AARON, PT  
Provider ID: N/A  
25495 MEDICAL CENTER DR STE 304  
MURRIETA, CA 92562  
Effective as of 01-DEC-20

ATKINS, AARON, PT  
Provider ID: N/A  
25495 MEDICAL CENTER DR STE 304  
MURRIETA, CA 92562  
Effective as of 01-NOV-18

ATKINS, CHEYENNE, PT†  
Provider ID: N/A  
25495 MEDICAL CENTER DR STE 304  
MURRIETA, CA 92562  
Effective as of 01-NOV-18

ATKINS, AARON, PT  
Provider ID: N/A  
25495 MEDICAL CENTER DR STE 304  
MURRIETA, CA 92562  
Effective as of 01-NOV-18

ATKINS, AARON, PT  
Provider ID: N/A  
24630 WASHINGTON AVE STE 201  
MURRIETA, CA 92562  
Effective as of 01-JUL-23

ATKINS, AARON, PT  
Provider ID: N/A  
24671 MONROE AVE STE C-201  
MURRIETA, CA 92562  
Effective as of 01-JUL-23

ATKINS, AARON, PT  
Provider ID: N/A  
24671 MONROE AVE STE C-201  
MURRIETA, CA 92562  
Effective as of 01-JUL-23
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-JUL-23

ATKINS, WILLIAM, PT
Provider ID: N/A
25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, AARON, PT
Provider ID: N/A
25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUL-23

ATKINS, WILLIAM, PT
Provider ID: N/A
25136 HANCOCK AVE STE A
MURRIETA, CA 92562
Effective as of 01-JUL-23

BARI, MONICA, PT
Provider ID: N/A
24671 MONROE AVE BLDG C201
MURRIETA, CA 92562
Effective as of 01-DEC-23

BARI, MONICA, PT
Provider ID: N/A
24671 MONROE AVE BLDG C201
MURRIETA, CA 92562
Effective as of 01-DEC-23

COBURN, PIERRE, PT
Provider ID: N/A
24671 MONROE AVE BLDG C201
MURRIETA, CA 92562
Effective as of 01-OCT-23

KARODY, ATULA, PT
Provider ID: N/A
25136 HANCOCK AVE
MURRIETA, CA 92562
Effective as of 01-FEB-24

KESEL, KELSEY, PT
Provider ID: N/A
24671 MONROE AVE BLDG C101
MURRIETA, CA 92562
Effective as of 01-MAR-24

SABIN, SCOTT, PT¹
Provider ID: N/A
24671 MONROE AVE BLDG C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

SABIN, SCOTT, PT¹
Provider ID: N/A
24671 MONROE AVE BLDG C-101
MURRIETA, CA 92562
Effective as of 01-MAY-22

RHEUMATOLOGY

FREYNE, BRIGID, MD¹
C1. 網絡內提供者清單

網絡內提供者清單

专科護理醫師

Provider ID: N/A
39755 MURRIETA HT SP F110
MURRIETA, CA 92563
Effective as of 01-MAY-14

SPEECH PATHOLOGIST

PEDERSEN, ERICA, SP
Provider ID: N/A
39755 MURRIETA HOT SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

PEDERSEN, ERICA, SP
Provider ID: N/A
39755 MURRIETA HOT SPRINGS RD
MURRIETA, CA 92563
Effective as of 01-MAY-23

SURGERY COLON

SURGERY

MOORE, PATRICK, MD†
Provider ID: N/A
25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-JUL-23

MOORE, PATRICK, MD†
Provider ID: N/A
25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-JUN-20

SURGERY GENERAL

BATRA, MUNISH, MD
Provider ID: N/A
25495 MEDICAL CENTER DR STE 303
MURRIETA, CA 92562
Effective as of 01-SEP-17

CHIN, MICHAEL, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24

CHIN, MICHAEL, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

CHIN, MICHAEL, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-JAN-24
C1. 網絡內提供者清單
专科護理醫師

MURRIETA, CA 92562
Effective as of 01-NOV-23
CROSS, MICHAEL, MD†
Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-AUG-20

DADA, FESTUS, MD†
Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-DEC-22

DADA, STEPHEN, MD†
Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-18

DADA, FESTUS, MD†
Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAY-14

DADA, FESTUS, MD†
Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-JUL-23

MEHTA, PRATIK, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-OCT-22

POLLACK, JAMES, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-22

POLLACK, JAMES, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-NOV-23

POLLACK, JAMES, MD†
Provider ID: N/A
41670 IVY ST STE B
MURRIETA, CA 92562
Effective as of 01-FEB-23

POLLACK, JAMES, MD†
Provider ID: N/A
25470 MEDICAL CENTER
DR STE 203
MURRIETA, CA 92562
Effective as of 01-MAR-23

SAMIMI, KIAN, MD
Provider ID: N/A
25405 HANCOCK AVE STE 217
MURRIETA, CA 92562
Effective as of 01-APR-23

SUH, DAVID, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 303
MURRIETA, CA 92562

Effective as of 01-NOV-23

Effective as of 01-JUN-17

Effective as of 01-DEC-22

Effective as of 01-MAR-23

Effective as of 01-OCT-22

Effective as of 01-MAR-23

Effective as of 01-JUL-21

Effective as of 01-JUL-23

Effective as of 01-JUN-17

Effective as of 01-DEC-22

Effective as of 01-MAR-23

Effective as of 01-FEB-23

Effective as of 01-APR-23

Effective as of 01-MAR-23

Effective as of 01-MAY-14

Your PCP’s physician group may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, certain services may require a mental health service provider to obtain Blue Shield preauthorization before being covered.

For online access to mental health service provider lists, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

專科護理醫師

**SUH, DAVID, MD**
Provider ID: N/A
- 25495 MEDICAL CENTER DR STE 303
  MURRIETA, CA 92562
  Effective as of 01-DEC-12

**TRAN, MICHAEL, MD**
Provider ID: N/A
- 41670 IVY ST STE B
  MURRIETA, CA 92562
  Effective as of 01-JUN-23

**TRAN, MICHAEL, MD**
Provider ID: N/A
- 41670 IVY ST STE B
  MURRIETA, CA 92562
  Effective as of 01-NOV-23

**VEGA, FRANCISCO, MD**
Provider ID: N/A
- 41670 IVY ST STE B
  MURRIETA, CA 92562
  Effective as of 01-NOV-23

**SURGERY HAND PLASTIC**

**KUPFER, DAVID, MD**
Provider ID: N/A
- 25495 MEDICAL CENTER DR STE 303
  MURRIETA, CA 92562
  Effective as of 01-MAR-23

**SURGERY**

**NEUROLOGICAL**

**ABSHIRE, BRET, MD**
Provider ID: N/A
- 25150 HANCOCK AVE STE 210
  MURRIETA, CA 92562
  Effective as of 01-FEB-20

**ABSHIRE, BRET, MD**
Provider ID: N/A
- 25150 HANCOCK AVE STE 210
  MURRIETA, CA 92562
  Effective as of 01-SEP-17

**ABSHIRE, BRET, MD**
Provider ID: N/A
- 25150 HANCOCK AVE STE 210
  MURRIETA, CA 92562
  Effective as of 01-SEP-17

**ABSHIRE, BRET, MD**
Provider ID: N/A
- 25150 HANCOCK AVE STE 210
  MURRIETA, CA 92562
  Effective as of 01-SEP-17

**ABSHIRE, BRET, MD**
Provider ID: N/A
- 25150 HANCOCK AVE STE 210
  MURRIETA, CA 92562
  Effective as of 01-SEP-17

**CHIRIANO, JASON, DO**
Provider ID: N/A
- 25470 MEDICAL CENTER DR STE 203
  MURRIETA, CA 92562
  Effective as of 01-MAR-23

**VEGA, FRANCISCO, MD**
Provider ID: N/A
- 41670 IVY ST STE B
  MURRIETA, CA 92562
  Effective as of 01-APR-20

**WANG, SHIN-CHERN, MD**
Provider ID: N/A
- 41670 IVY ST STE B
  MURRIETA, CA 92562
  Effective as of 01-FEB-23

**WANG, SHIN-CHERN, MD**
Provider ID: N/A
- 41670 IVY ST STE B
  MURRIETA, CA 92562
  Effective as of 01-OCT-15

**SURGERY GENERAL**

**VASULAR**

**CHIN, MICHAEL, MD**
Provider ID: N/A
- 41670 IVY ST STE B
  MURRIETA, CA 92562
  Effective as of 01-APR-20

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

専科護理醫師

ABSHIRE, BRET, MD†
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-SEP-17

FRIEDLICH, DANIEL, MD†
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-MAY-15

FRIEDLICH, DANIEL, MD†
Provider ID: N/A
25150 HANCOCK AVE STE 210
MURRIETA, CA 92562
Effective as of 01-FEB-19

CHENG, WAYNE, MD†
Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

CHENG, WAYNE, MD†
Provider ID: N/A
28078 BAXTER RD STE 340
MURRIETA, CA 92563
Effective as of 01-JUL-21

DRINHAUS, ROLF, MD†
Provider ID: N/A
25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-APR-08

ERWTEMAN, ANDREW, MD†
Provider ID: N/A
25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-OCT-17

Surgery Orthopedic

AGYEMAN, KOFI, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-MAR-14

AGYEMAN, KOFI, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-MAR-22

AGYEMAN, KOFI, MD†
Provider ID: N/A
25395 HANCOCK AVE STE 250
MURRIETA, CA 92562
Effective as of 01-MAR-22

CHENG, WAYNE, MD†
Provider ID: N/A
25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-AUG-20

ERWTEMAN, ANDREW, MD†
Provider ID: N/A
25150 HANCOCK AVE STE 200
MURRIETA, CA 92562
Effective as of 01-NOV-16

ERWTEMAN, ANDREW, MD†
Provider ID: N/A
521 E ELDER STREET SUITE 202
MURRIETA, CA 92562
Effective as of 01-AUG-20

GARGULINSKI, MATTHEW, DO†
Provider ID: N/A
25150 HANCOCK AVE STE 522
MURRIETA, CA 92562
Effective as of 01-JUL-21
您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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<td>28078 BAXTER RD STE 330</td>
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<td>28078 BAXTER RD STE 510</td>
<td>01-JUN-21</td>
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<td>VO, QUANG, MD†</td>
<td>25470 MEDICAL CENTER DR STE 203</td>
<td>01-JUL-23</td>
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<td>UROLOGY</td>
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<td>CONNER, RICHARD, MD†</td>
<td>25495 MEDICAL CENTER DR STE 303</td>
<td>01-SEP-14</td>
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<tr>
<td>CRISELL, MONISHA, MD†</td>
<td>25150 HANCOCK AVE STE 110</td>
<td>01-MAY-20</td>
<td>N/A</td>
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</tr>
</tbody>
</table>
C1. 網絡內提供者清單

專科護理醫師

- **网络内提供者清單**
  - **CRISSELL, MONISHA, MD†**
    - Provider ID: N/A
    - 25495 MEDICAL CENTER
      - DR STE 204
      - MURRIETA, CA 92562
    - Effective as of 01-MAY-15
  - **CRISSELL, MONISHA, MD†**
    - Provider ID: N/A
    - 25495 MEDICAL CENTER
      - DR STE 204
      - MURRIETA, CA 92562
    - Effective as of 01-JUN-15
  - **CRISSELL, MONISHA, MD†**
    - Provider ID: N/A
    - 25495 MEDICAL CENTER
      - DR STE 204
      - MURRIETA, CA 92562
    - Effective as of 01-SEP-14
  - **CRISSELL, MONISHA, MD†**
    - Provider ID: N/A
    - 25495 MEDICAL CENTER
      - DR STE 204
      - MURRIETA, CA 92562
    - Effective as of 01-JAN-04
  - **CRISSELL, MONISHA, MD†**
    - Provider ID: N/A
    - 25495 MEDICAL CENTER
      - DR STE 204
      - MURRIETA, CA 92562
    - Effective as of 01-FEB-15
  - **KIM, FRANK, MD†**
    - Provider ID: N/A
    - 28078 BAXTER RD STE 450
      - MURRIETA, CA 92563
    - Effective as of 01-MAY-15
  - **KIM, FRANK, MD†**
    - Provider ID: N/A
    - 28078 BAXTER RD STE 450
      - MURRIETA, CA 92563
    - Effective as of 01-JUN-15
  - **KIM, FRANK, MD†**
    - Provider ID: N/A
    - 28078 BAXTER RD STE 450
      - MURRIETA, CA 92563
    - Effective as of 01-SEP-14
  - **KIM, FRANK, MD†**
    - Provider ID: N/A
    - 28078 BAXTER RD STE 450
      - MURRIETA, CA 92563
    - Effective as of 01-JAN-24
  - **KIM, FRANK, MD†**
    - Provider ID: N/A
    - 28078 BAXTER RD STE 450
      - MURRIETA, CA 92563
    - Effective as of 01-NOV-20
  - **KIM, FRANK, MD†**
    - Provider ID: N/A
    - 28078 BAXTER RD STE 450
      - MURRIETA, CA 92563
    - Effective as of 01-DEC-20
  - **KIM, FRANK, MD†**
    - Provider ID: N/A
    - 28078 BAXTER RD STE 450
      - MURRIETA, CA 92563
    - Effective as of 01-DEC-20
  - **KIM, FRANK, MD†**
    - Provider ID: N/A
    - 28078 BAXTER RD STE 450
      - MURRIETA, CA 92563
    - Effective as of 01-DEC-20
  - **LARSON, BENJAMIN, MD**
    - Provider ID: N/A
    - 28078 BAXTER RD STE 430
      - MURRIETA, CA 92563
    - Effective as of 01-MAY-23
  - **LARSON, BENJAMIN, MD†**
    - Provider ID: N/A
    - 25495 MEDICAL CENTER
      - DR STE 204
      - MURRIETA, CA 92562
    - Effective as of 01-AUG-15
  - **LARSON, BENJAMIN, MD†**
    - Provider ID: N/A
    - 25495 MEDICAL CENTER
      - DR STE 204
      - MURRIETA, CA 92562
    - Effective as of 01-AUG-15
  - **LARSON, BENJAMIN, MD†**
    - Provider ID: N/A
    - 25495 MEDICAL CENTER
      - DR STE 204
      - MURRIETA, CA 92562
    - Effective as of 01-DEC-20

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

LARSON, BENJAMIN, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-23

LUTTGE, SCOTT, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JUL-23

LARSON, BENJAMIN, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-OCT-15

LOUIE, BRANDON, MD
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAY-20

LOUIE, BRANDON, MD
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-24

LUTTGE, SCOTT, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-23

SHAH, NEMI, MD
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-FEB-24

TAKESITA, KEN, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-15

TALANKI, VARUN, MD
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-MAY-23

TALANKI, VARUN, MD
Provider ID: N/A
28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-NOV-15

526
C1. 網絡內提供者清單

専科護理醫師

TALANKI, VARUN, MD
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-MAY-22

TALANKI, VARUN, MD
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-JAN-22

TSI, SY, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JUL-23

TSI, SY, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-22

TSI, SY, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-AUG-16

VEMULAPALLI, SREENIVAS, MD
Provider ID: N/A
28078 BAXTER RD STE 430
MURRIETA, CA 92563
Effective as of 01-MAY-23

VEMULAPALLI, SREENIVAS, MD†
Provider ID: N/A
25495 MEDICAL CENTER
DR STE 204
MURRIETA, CA 92562
Effective as of 01-OCT-14

YUN, EDWARD, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-APR-16

YUN, EDWARD, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JUL-23

YUN, EDWARD, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-JAN-23

YUN, EDWARD, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-DEC-23

YUN, EDWARD, MD†
Provider ID: N/A
28078 BAXTER RD STE 450
MURRIETA, CA 92563
Effective as of 01-NOV-23

KIM, JAMES, MD
<table>
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<tr>
<th>Name</th>
<th>Provider ID</th>
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<td>KIM, JAMES, MD</td>
<td>N/A</td>
<td>1415 E 8TH ST STE 3</td>
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<tr>
<td>LY, NANCY, MD</td>
<td>N/A</td>
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<td>LY, NANCY, MD</td>
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<td>1415 E 8TH ST STE 4</td>
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<td>NANAVATI, VIMAL, MD</td>
<td>N/A</td>
<td>2345 E 8TH ST</td>
<td>01-FEB-23</td>
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<td>OVIDEO-LINARES, Raul, MD</td>
<td>N/A</td>
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<td>01-AUG-23</td>
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<td>OVIDEO-LINARES, Raul, MD</td>
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<td>PANDHI, JAY, MD†</td>
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<td>PANDHI, JAY, MD†</td>
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<td>ROUGH, STEVEN, MD</td>
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<td>330 E 8TH ST</td>
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<td>DRISCOLL, SUSAN, NP</td>
<td>N/A</td>
<td>340 E 8TH ST</td>
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<td>KYI, MYA, NP</td>
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<td>01-MAR-24</td>
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<tr>
<td>OLESCO, JENNIFER, NP</td>
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<td>655 EUCLID AVE STE 303</td>
<td>01-AUG-23</td>
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<td>REAL, MARIA, NP</td>
<td>N/A</td>
<td>217 HIGHLAND AVE</td>
<td>01-AUG-23</td>
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<tr>
<td>REDDY, PRIYA, NP</td>
<td>N/A</td>
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<td>01-OCT-23</td>
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<tr>
<td>RENZAS, JENNIFER, NP</td>
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<td>01-JUL-21</td>
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<tr>
<td>SWEENEY, ZSA ZSA, NP</td>
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<td>01-JUL-21</td>
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<tr>
<td>VILLANUEVA DE GUTIE, BERENICE, NP</td>
<td>N/A</td>
<td>217 HIGHLAND AVE</td>
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<tr>
<td>WILLIAMS, BREAHNA, NP</td>
<td>N/A</td>
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<td>01-DEC-21</td>
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<tr>
<td>CERTIFIED REGISTERED NURSE MIDWIFE</td>
<td>N/A</td>
<td>655 EUCLID AVE STE 304</td>
<td>01-MAR-24</td>
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<tr>
<td>MAST, ASHLEY, CRNM</td>
<td>N/A</td>
<td>217 HIGHLAND AVE</td>
<td>01-OCT-23</td>
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<td>CHIROPRACTOR</td>
<td>N/A</td>
<td>217 HIGHLAND AVE</td>
<td>01-OCT-23</td>
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<tr>
<td>DORADO, SUE, DC</td>
<td>N/A</td>
<td>217 HIGHLAND AVE</td>
<td>01-JUL-22</td>
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<tr>
<td>GILIBERTO, JOSEPH, DC†</td>
<td>N/A</td>
<td>2835 HIGHLAND AVE</td>
<td>01-OCT-21</td>
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<td>HALEY, STEVEN, DC</td>
<td>N/A</td>
<td>217 HIGHLAND AVE</td>
<td>01-AUG-22</td>
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<tr>
<td>CELANO, NICHOLAS, MD†</td>
<td>N/A</td>
<td>655 EUCLID AVE STE 401</td>
<td>01-MAR-18</td>
</tr>
<tr>
<td>DERMATOLOGY</td>
<td>N/A</td>
<td>655 EUCLID AVE STE 304</td>
<td>01-OCT-23</td>
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### Network Provider List

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<th>Name</th>
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<tr>
<td>CELANO, NICHOLAS, MD†</td>
<td>Internal Medicine</td>
<td>655 Euclid Ave Ste 304, National City, CA 91950</td>
<td>01-JUL-22</td>
<td>N/A</td>
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</tr>
<tr>
<td>CELANO, NICHOLAS, MD†</td>
<td>Internal Medicine</td>
<td>655 Euclid Ave Ste 401, National City, CA 91950</td>
<td>01-JAN-21</td>
<td>N/A</td>
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<tr>
<td>CHIANG, JENNIFER, MD†</td>
<td>Internal Medicine</td>
<td>655 Euclid Ave Ste 304, National City, CA 91950</td>
<td>01-JUL-22</td>
<td>N/A</td>
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<td>CHIANG, JENNIFER, MD†</td>
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<td>CHIANG, JENNIFER, MD†</td>
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<td>655 Euclid Ave Ste 304, National City, CA 91950</td>
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<tr>
<td>NELSON, AISLYN, MD†</td>
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<td>NELSON, AISLYN, MD†</td>
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<td>LIN, SHINKO, MD</td>
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<td>SATEESH, BROOKE, MD†</td>
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<td>SATEESH, BROOKE, MD†</td>
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<tr>
<td>TYAGI, ABHILASHA, MD†</td>
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<td>01-AUG-22</td>
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</table>

*Your PCP’s provider group may have network providers for mental health services. Please review the following list. You may contact the providers directly. Certain services may require preauthorization by the mental health provider with Blue Shield, after which the service may be covered. For online access to the mental health provider list, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

專科護理醫師

NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-AUG-22

TYAGI, ABHILASHA, MD†
Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-22

TYAGI, ABHILASHA, MD†
Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

UEBELHOER, NATHAN, DO†
Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

UEBELHOER, NATHAN, DO†
Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-FEB-22

UEBELHOER, NATHAN, DO†
Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

UEBELHOER, NATHAN, DO†
Provider ID: N/A
655 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-FEB-23

UEBELHOER, NATHAN, DO†
Provider ID: N/A
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Effective as of 01-APR-18

EMERGENCY MEDICINE

TABILA, BRIAN, MD†
Provider ID: N/A
610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

ENDOCRINOLOGY

METABOLISM DIABETES

VALDEZ, KRYSATL, MD
Provider ID: N/A
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

FAMILY PRACTICE

DILLON, MAYRA, MD†
Provider ID: N/A
1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-AUG-23

GASTROENTEROLOGY

GISH, ROBERT, MD†
Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JUN-21

INTERNAL MEDICINE

CRITICAL CARE MEDICINE

LIM, ROSEMARIE, MD†
Provider ID: N/A
655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

TABILA, BRIAN, MD†
Provider ID: N/A
655 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-21

INTERVENTIONAL CARDIOLOGY

CAMACHO, BENJAMIN, MD†
Provider ID: N/A
1615 SWEETWATER RD
NATIONAL CITY, CA 91950
Effective as of 01-AUG-21

CAMACHO, BENJAMIN, MD†
Provider ID: N/A
1615 SWEETWATER RD STE
C1. 網絡內提供者清單

<table>
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<th>Name</th>
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<td>DAMANI, SAMIR, MD</td>
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<td>655 EUCLID AVE STE 208</td>
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<td>LY, NANCY, MD</td>
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<td>1415 E 8TH ST STE 6</td>
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<td>ROUGH, STEVEN, MD</td>
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<td>SHETABI, KAMBIZ, MD</td>
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<td>WYSOCZANSKI, MARIUSZ, MD</td>
<td>N/A</td>
<td>1415 E 8TH ST STE 8</td>
<td>NATIONAL CITY, CA 91950</td>
<td>01-SEP-22</td>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

加強護理醫師

ID: N/A

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950

有效為自 01-JAN-21

WYSOCZANSKI, MARIUSZ, MD‡

Provider ID: N/A

502 EUCLID AVE STE 104
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-SEP-22

LICENSED CLINICAL SOCIAL WORKER

ALVAREZ, DIANA, LCSW

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-APR-21

JASSO-RAMIREZ, MARTHA, LCSW

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-SEP-21

SACHS, MELISSA, LCSW‡

Provider ID: N/A

2400 E 8TH ST
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-MAR-21

WRIGHT, STEPHANIE, LCSW

Provider ID: N/A

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JAN-24

MARRIAGE FAMILY THERAPIST

KUEK, JOHN, MFT

Provider ID: N/A

217 HIGHLAND AVE
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-APR-21

NEPHROLOGY

CALDERON MOLINA, JUAN, MD‡

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-NOV-23

CALDERON MOLINA, JUAN, MD‡

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-SEP-22

COMUNALE, RODERICK, MD‡

Provider ID: N/A

502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JUL-23

COMUNALE, RODERICK, MD‡

Provider ID: N/A

502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JUL-22

COMUNALE, RODERICK, MD‡

Provider ID: N/A

502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JAN-21

MAA CHIP, FHARAK, MD‡

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JUL-22

SACAMAY, TAGUMPAY, MD‡

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-SEP-20

SACAMAY, TAGUMPAY, MD‡

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JUL-22

SACAMAY, TAGUMPAY, MD‡

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JAN-21

SACAMAY, TAGUMPAY, MD‡

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JAN-21

SACAMAY, TAGUMPAY, MD‡

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JUL-22

SACAMAY, TAGUMPAY, MD‡

Provider ID: N/A

655 EUCLID AVE STE 303
NATIONAL CITY, CA 91950

Teleservice

有效為自 01-JAN-21
C1. 網絡內提供者清單

**NEUROLOGY**

BOBO, JERRY, MD†
Provider ID: N/A
502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DEL ROSARIO, GELEN, MD†
Provider ID: N/A
502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER, MD
Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

ASLIAN, AZITA, MD†
Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

ASLIAN, AZITA, MD†
Provider ID: N/A
2400 E 8TH ST
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

CHANG, TOM, MD†
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

OPHTHALMOLOGY

CARRABY, ARNETT, MD†
Provider ID: N/A
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

2240 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

DELENGOCKY, TAYSON, DO
Provider ID: N/A
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

FISH, STEVEN, MD†
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

534
C1. 網絡內提供者清單

專科護理醫師

GOLLOGLY, HEIDRUN, MD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-18

GOLLOGLY, HEIDRUN, MD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

GOLLOGLY, HEIDRUN, MD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-MAR-18

GOLLOGLY, HEIDRUN, MD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

HAIGHT, BRUCE, MD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-22

HUSDON, HENRY, MD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-APR-23

MCDONNELL, EMMA, MD
Provider ID: N/A
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD
Provider ID: N/A
2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-MAR-23

MCGRAW, JOSEPH, MD
Provider ID: N/A
2240 E PLAZA BOULEVARD
SUITE F AND G
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

MCGRAW, JOSEPH, MD
Provider ID: N/A
2240 E PLAZA BLVD STE F
NATIONAL CITY, CA 91950
Effective as of 01-OCT-21

MCGRAW, JOSEPH, MD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

MCGRAW, JOSEPH, MD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21
C1. 網絡內提供者清單

专科護理醫師

MD
Provider ID: N/A

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<td>PERRY, ARTHUR, MD</td>
<td>655 EUCLID AVE STE 302</td>
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<td>PRABHU, SUJATA, MD</td>
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<td>WAINESS, REID, MD</td>
<td>2240 E PLAZA BLVD STE F</td>
<td>01-MAR-24</td>
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OPTOMETRIST

AOTO, KIM, OD
Provider ID: N/A

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<td>PEARIS, JAMES, OD</td>
<td>1520 E PLAZA BLVD</td>
<td>01-JAN-21</td>
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<tr>
<td>WAINESS, REID, OD</td>
<td>2240 E PLAZA BLVD STE F &amp; G</td>
<td>01-SEP-22</td>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

F&G
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

KOO, ANITA, OD
Provider ID: N/A
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

KOO, ANITA, OD
Provider ID: N/A
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

MARR, RYAN, OD
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-DEC-22

VINH, JOHN, OD†
Provider ID: N/A
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

PEDIATRIC EMERGENCY
MEDICINE

BONSU, BEMA, MD†
Provider ID: N/A
1136 D AVE
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

PHYSICIAN ASSISTANT

HABBOUSH, RANA, PA
Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

HIGUERA, EDITH, PA
Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-OCT-23

LANDON, JEFFREY, PA
Provider ID: N/A
610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-NOV-23

MACASADIA, MARITES, PA
Provider ID: N/A
610 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Effective as of 01-SEP-20

MERCER, KELLY, PA†
Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

SHAH, SHEENA, PA
Provider ID: N/A
502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-21

UDOH, EKAETE, PA
Provider ID: N/A
610 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-MAR-24

PODIATRIST

ATMAR, AKMAL, DPM†
Provider ID: N/A
2345 E 8TH ST STE 105
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

CAINE, SAMUEL, DPM
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-23

CAINE, SAMUEL, DPM
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-24
C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-DEC-23

DAVIDSON, JOHN, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-DEC-23

DAVIDSON, JOHN, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-FEB-19

DAVIDSON, JOHN, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

DAVIDSON, JOHN, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-22

DAVIDSON, JOHN, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-SEP-22

DAVIDSON, JOHN, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-DEC-23

KRIGER, STEPHEN, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-22

NGUYEN, HAN, DPM
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JUN-23

NGUYEN, HAN, DPM
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JUL-23

NGUYEN, HAN, DPM
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-JAN-24

SANICOLAS, MARIA THERESA, DPM†
Provider ID: N/A
610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

SANICOLAS, MARIA THERESA, DPM†
Provider ID: N/A
610 EUCLID AVE STE 304
NATIONAL CITY, CA 91950
Effective as of 01-JAN-21

TSAI, GRACE, DPM
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

TSAI, GRACE, DPM
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-SEP-23

XU, DIXON, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

XU, DIXON, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAR-24

XU, DIXON, DPM†
Provider ID: N/A
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Effective as of 01-MAY-21

PSYCHIATRY

BOBO, JERRY, MD†
Provider ID: N/A
502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

BOBO, JERRY, MD†
C1. 網絡內提供者清單

专科護理醫師

CHAUDHRI, YASHWANT, MD
Provider ID: N/A
502 EUCLID AVE STE 204
NATIONAL CITY, CA 91950
Effective as of 01-SEP-22

GALANT, DANIEL, PhD
Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

KUGEL, SAMUEL, MD
Provider ID: N/A
502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

KUGEL, SAMUEL, MD
Provider ID: N/A
502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

KUGEL, SAMUEL, MD
Provider ID: N/A
502 EUCLID AVE STE 305
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-JAN-21

PSYCHOLOGIST

BAHENA-COLLEY, SANDRA, PSYD
Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

BAHENA-COLLEY, SANDRA, PSYD
Provider ID: N/A
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Teleservice
Effective as of 01-APR-21

REGISTERED PHYSICAL THERAPIST

CHENG, BRANDON, PT
Provider ID: N/A
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-FEB-24

DORSEY, KYLE, PT
Provider ID: N/A
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Effective as of 01-MAY-23
C1. 網絡內提供者清單
専科護理醫師

**Surgery Plastic**

GUTTIKONDA, RAKHESH, DO
Provider ID: N/A
655 EUCLID AVE STE 200
NATIONAL CITY, CA 91950
Effective as of 01-DEC-23

**Allergy Immunology**

SCHWINDT, CHRISTINA, MD†
Provider ID: N/A
400 NEWPORT CENTER DR STE 401
NEWPORT BEACH, CA 92660
Effective as of 01-JUL-23

SCHWINDT, CHRISTINA, MD†
Provider ID: N/A
400 NEWPORT CENTER DR STE 401
NEWPORT BEACH, CA 92660
Effective as of 01-JUL-23

**Certified Nurse Practitioner**

ANTONYAN, HOLLY, NPF†
Provider ID: N/A
1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-22

LEE, ALEXANDER, NP
Provider ID: N/A
360 SAN MIGUEL DR STE 300
NEWPORT BEACH, CA 92660
Effective as of 01-APR-24

**Dermatology**

AWADALLA, FARAH, MD†
Provider ID: N/A
400 NEWPORT CENTER DR STE 702
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-22

AWADALLA, FARAH, MD†
Provider ID: N/A
400 NEWPORT CENTER DR STE 702
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-22

BIERMAN, DINA, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 405
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-23

BIERMAN, DINA, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 405
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-22

BIERMAN, DINA, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 405
NEWPORT BEACH, CA 92660
Effective as of 01-APR-24

BIERMAN, DINA, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 405
NEWPORT BEACH, CA 92660
Effective as of 01-APR-24

BIERMAN, DINA, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 405
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-23

BREITHAUPT, ANDREW, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-SEP-18
### C1. 網絡內提供者清單

#### 專科護理醫師

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<td>01-DEC-23</td>
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<td>FARSHIDI, ARTA, MD</td>
<td>N/A</td>
<td>360 SAN MIGUEL DR STE 405, NEWPORT BEACH, CA 92660</td>
<td>01-JUL-23</td>
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<td>FARSHIDI, ARTA, MD</td>
<td>N/A</td>
<td>360 SAN MIGUEL DR STE 405, NEWPORT BEACH, CA 92660</td>
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<td>01-JAN-24</td>
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<td>FAZEL, NASIM, MD</td>
<td>N/A</td>
<td>1441 AVOCADO AVE STE 806, NEWPORT BEACH, CA 92660</td>
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<td>1441 AVOCADO AVE STE 806, NEWPORT BEACH, CA 92660</td>
<td>01-FEB-23</td>
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<td>FAZEL, NASIM, MD</td>
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<td>01-SEP-23</td>
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<tr>
<td>FAZEL, NASIM, MD</td>
<td>N/A</td>
<td>1441 AVOCADO AVE STE 806, NEWPORT BEACH, CA 92660</td>
<td>01-OCT-23</td>
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<td>FALZEL, NASIM, MD</td>
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<td>FAZEL, NASIM, MD</td>
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<td>1441 AVOCADO AVE STE 806, NEWPORT BEACH, CA 92660</td>
<td>01-OCT-23</td>
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<tr>
<td>FOREMAN, TANYA, MD</td>
<td>N/A</td>
<td>400 NEWPORT CENTER DR STE 702, NEWPORT BEACH, CA 92660</td>
<td>01-JUL-23</td>
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<tr>
<td>FOREMAN, TANYA, MD</td>
<td>N/A</td>
<td>400 NEWPORT CENTER DR STE 702, NEWPORT BEACH, CA 92660</td>
<td>01-OCT-23</td>
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C1. 網絡內提供者清單

專科護理醫師

FOREMAN, TANYA, MD†
Provider ID: N/A
400 NEWPORT CENTER DR STE 702
NEWPORT BEACH, CA 92660
Effective as of 01-SEP-18

FOREMAN, TANYA, MD†
Provider ID: N/A
400 NEWPORT CENTER DR STE 702
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-17

FOWLER, VINCENT, MD†
Provider ID: N/A
240 NEWPORT CENTER DR STE 105
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-20

GRUSHCHAK, SOLOMIYA, MD
Provider ID: N/A
1441 AVOCADO AVE STE 409
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD
Provider ID: N/A
1441 AVOCADO AVE STE 409
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-24

HENDERSON, GREGORY, MD
Provider ID: N/A
1441 AVOCADO AVE STE 409
NEWPORT BEACH, CA 92660
Effective as of 01-OCT-23

HENDERSON, GREGORY, MD
Provider ID: N/A
1441 AVOCADO AVE STE 409
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-23

HENDERSON, GREGORY, MD
Provider ID: N/A
360 SAN MIGUEL DR STE 309
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-23

HENDERSON, GREGORY, MD
Provider ID: N/A
360 SAN MIGUEL DR STE 309
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-21

KAMEL, JOSEPH, DO
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-MAR-24

KAMEL, JOSEPH, DO
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-MAR-24

KARAVAN JAHROMI, MAHSA, MD†
Provider ID: N/A
1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660
Effective as of 01-SEP-19

KHERADMAND, SHIVA, DO†
Provider ID: N/A
240 NEWPORT CENTER DR STE 105
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-21

KHERADMAND, SHIVA, DO†
Provider ID: N/A
240 NEWPORT CENTER DR STE 105
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-21

LANDER, JEFFREY, MD†
Provider ID: N/A
1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660

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C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-DEC-21
LANDER, JEFFREY, MD†
Provider ID: N/A
办公室: 1401 AVOCADO AVE STE 703
地址: NEWPORT BEACH, CA 92660
日期: 01-DEC-21

Effective as of 01-DEC-22
LANDER, JEFFREY, MD†
Provider ID: N/A
办公室: 1441 AVOCADO AVE STE 806
地址: NEWPORT BEACH, CA 92660
日期: 01-DEC-22

LANDER, JEFFREY, MD†
Provider ID: N/A
办公室: 1441 AVOCADO AVE STE 806
地址: NEWPORT BEACH, CA 92660
日期: 01-JAN-23

LANDER, JEFFREY, MD†
Provider ID: N/A
办公室: 1441 AVOCADO AVE STE 806
地址: NEWPORT BEACH, CA 92660
日期: 01-OCT-23

LANDER, JEFFREY, MD†
Provider ID: N/A
办公室: 1401 AVOCADO AVE STE 703
地址: NEWPORT BEACH, CA 92660
日期: 01-MAY-23

LANDER, JEFFREY, MD†
Provider ID: N/A
办公室: 1441 AVOCADO AVE STE 806
地址: NEWPORT BEACH, CA 92660
日期: 01-JAN-24

LANDER, ROBERT, MD
Provider ID: N/A
办公室: 360 SAN MIGUEL DR STE 501
地址: NEWPORT BEACH, CA 92660
日期: 01-MAR-24

LEDON, JENNIFER, MD
Provider ID: N/A
办公室: 400 NEWPORT CENTER DR STE 702
地址: NEWPORT BEACH, CA 92660
日期: 01-JUL-23

LEDON, JENNIFER, MD†
Provider ID: N/A
办公室: 1401 AVOCADO AVE STE 703
地址: NEWPORT BEACH, CA 92660
日期: 01-OCT-23

LEDON, JENNIFER, MD†
Provider ID: N/A
办公室: 1401 AVOCADO AVE STE 703
地址: NEWPORT BEACH, CA 92660
日期: 01-MAY-23

LEDON, JENNIFER, MD
Provider ID: N/A
办公室: 400 NEWPORT CENTER DR STE 702
地址: NEWPORT BEACH, CA 92660
日期: 01-MAR-24

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<th>Title</th>
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<th>City</th>
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<tbody>
<tr>
<td>LEDON, JENNIFER, MD</td>
<td>Specialist</td>
<td>N/A</td>
<td>1401 AVOCADO AVE STE 703</td>
<td>Newport Beach</td>
<td>CA</td>
<td>92660</td>
<td>as of 01-MAY-23</td>
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<tr>
<td>LEDON, JENNIFER, MD</td>
<td>Specialist</td>
<td>N/A</td>
<td>1401 AVOCADO AVE STE 703</td>
<td>Newport Beach</td>
<td>CA</td>
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<td>LEDON, JENNIFER, MD</td>
<td>Specialist</td>
<td>N/A</td>
<td>400 NEWPORT CENTER DR STE 702</td>
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<td>LIEM, WIEKE, MD</td>
<td>Specialist</td>
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<td>1401 AVOCADO AVE STE 703</td>
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### 專科護理醫師

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C1. 網絡內提供者清單
専科護理醫師

92660
Effective as of 01-FEB-23

NAMI, NAVID, DO†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-23

NAMI, NAVID, DO†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-23

NAMI, NAVID, DO†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-23

NAMI, NAVID, DO†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-23

NAMI, NAVID, DO†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-SEP-19

NGUYEN, DENNIS, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-OCT-18

NGUYEN, DENNIS, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-23

NGUYEN, DENNIS, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-23

NGUYEN, DENNIS, MD†
Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-23

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Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
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Effective as of 01-FEB-23

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360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-23

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Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-23
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Your PCP's physician group may have networked behavioral health services providers. Please refer to the below-listed providers. You can contact these providers directly. Please note that some services may require prior authorization from the Blue Shield to be covered.

To access the Behavioral Health Services Provider List online, please visit blueshieldca.com/fad.
### C1. 網絡內提供者清單

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<tr>
<td>SODHI, SANDEEP, MD†</td>
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<td>PATHAK, BHAVAIA, MD†</td>
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C1. 網絡內提供者清單
専科護理醫師

NEWPORT BEACH, CA 92660
Effective as of 01-MAR-23

**INTERVENTIONAL CARDIOLOGY**

SARABI, DENNIS, MD
Provider ID: N/A
400 NEWPORT CENTER DR STE 610
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-21

AGARWAL, MADHU, MD
Provider ID: N/A
400 NEWPORT CENTER DR STE 605
NEWPORT BEACH, CA 92660
Effective as of 01-AUG-11

SUGIHARA, CORINNE, MD
Provider ID: N/A
1441 AVOCADO AVE STE 608
NEWPORT BEACH, CA 92660
Effective as of 01-AUG-11

EIFRIG, CHARLES WILLIAM, MD
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-JUL-12

**OBSTETRICS / GYNECOLOGY**

AL-AZAWI, HIND, MD
Provider ID: N/A
366 SAN MIGUEL DR STE 209
NEWPORT BEACH, CA 92660
Effective as of 01-JUL-23

AGARWAL, MADHU, MD
Provider ID: N/A
400 NEWPORT CENTER DR STE 605
NEWPORT BEACH, CA 92660
Effective as of 01-OCT-22

AGARWAL, MADHU, MD
Provider ID: N/A
360 SAN MIGUEL DR STE 307
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-20

SUGIHARA, CORINNE, MD
Provider ID: N/A
1441 AVOCADO AVE STE 608
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-18

AGARWAL, MADHU, MD
Provider ID: N/A
400 NEWPORT CENTER DR STE 605
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-21

AGARWAL, MADHU, MD
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-JAN-17

CIES, WILLIAM, MD
Provider ID: N/A
400 NEWPORT CENTER DR STE 404
NEWPORT BEACH, CA 92660

EIFRIG, CHARLES WILLIAM, MD
Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
Effective as of 01-DEC-20

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Provider ID: N/A
360 SAN MIGUEL DR STE 407
NEWPORT BEACH, CA 92660
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Provider ID: N/A
360 SAN MIGUEL DR STE 407
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C1. 網絡內提供者清單

專科護理醫師

BERTELSEN, CAITLIN, MD†
Provider ID: N/A
☞ 400 NEWPORT CENTER DR STE 302
NEWPORT BEACH, CA 92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†
Provider ID: N/A
☞ 400 NEWPORT CENTER DR STE 302
NEWPORT BEACH, CA 92660
Effective as of 01-AUG-21

SCHWARTZ, MARISSA, MD†
Provider ID: N/A
☞ 400 NEWPORT CENTER DR STE 302
NEWPORT BEACH, CA 92660
Effective as of 01-JUL-12

WILLNER, AYAL, MD†
Provider ID: N/A
☞ 400 NEWPORT CENTER DR STE 302
NEWPORT BEACH, CA 92660
Effective as of 01-JUL-12

HARRISON, AMY, MD
Provider ID: N/A
☞ 360 SAN MIGUEL DR STE 105
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-24

HARRISON, AMY, MD
Provider ID: N/A
☞ 369 SAN MIGUEL DR STE 375
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-24

HARRISON, AMY, MD
Provider ID: N/A
☞ 369 SAN MIGUEL DR STE 375
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-24

PEDIATRICS

HOLM, WILLIAM, MD†
Provider ID: N/A
☞ 1401 AVOCADO AVE STE 802
NEWPORT BEACH, CA 92660
Effective as of 01-FEB-21

SAFER, TERRA, MD
Provider ID: N/A
☞ 360 SAN MIGUEL DR STE 375
NEWPORT BEACH, CA 92660
Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

CORTES, ELIZABETH, PA
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
360 SAN MIGUEL DR STE 501
NEWPORT BEACH, CA 92660
Effective as of 01-AUG-23

KANE, KARA, PA
Provider ID: N/A
1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660
Effective as of 01-OCT-22

KAUFMAN, BRITNEY, PA
Provider ID: N/A
240 NEWPORT CENTER DR STE 105
NEWPORT BEACH, CA 92660
Effective as of 01-OCT-22

KLEINSMITH, DARIN, PA
Provider ID: N/A
1441 AVOCADO AVE STE 806
NEWPORT BEACH, CA 92660
Effective as of 01-NOV-20

LUCATERO, JENNIFER, PA
Provider ID: N/A
240 NEWPORT CENTER DR STE 105
NEWPORT BEACH, CA 92660

MOUNTAIN, KELLY, PA
Provider ID: N/A
1441 AVOCADO AVE STE 503
NEWPORT BEACH, CA 92660
Effective as of 01-APR-23

NORMAN, STACY, PA
Provider ID: N/A
1441 AVOCADO AVE STE 806
NEWPORT BEACH, CA 92660
Effective as of 01-APR-23

STANDEL, SARAH, PA
Provider ID: N/A
1401 AVOCADO AVE STE 703
NEWPORT BEACH, CA 92660
Effective as of 01-JUL-19

PODIATRIST

HAUPT, DAVID, DPM
Provider ID: N/A
400 NEWPORT CENTER DR STE 706
NEWPORT BEACH, CA 92660
Effective as of 01-OCT-19

LEAMING, ROBERT, DPM
Provider ID: N/A
366 SAN MIGUEL DR STE 210
NEWPORT BEACH, CA 92660
Teleservice
Effective as of 01-FEB-24

LEAMING, ROBERT, DPM
Provider ID: N/A
366 SAN MIGUEL DR STE 210
NEWPORT BEACH, CA 92660
Teleservice
Effective as of 01-FEB-24

MERCADO, BRYANT, DPM
Provider ID: N/A
400 NEWPORT CENTER DR STE 706
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<td>LIM, DEAN, PSYD</td>
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<td>BONEV, VALENTINA, MD</td>
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*Your PCP's provider group may have their own list of network providers. Please refer to the list below. You can contact these providers directly. Please note that certain services may require prior authorization from the mental health provider before being covered.*

To access the mental health provider list online, visit [blueshieldca.com/fad](https://blueshieldca.com/fad).
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<tr>
<td>SPORTS MEDICINE</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
専科護理醫師

Effective as of 01-JAN-23

COHEN, ZACHARY, MD\d
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-NOV-21

COHEN, ZACHARY, MD\d
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

COHEN, ZACHARY, MD\d
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JAN-23

COHEN, ZACHARY, MD\d
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

COHEN, ZACHARY, MD\d
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-OCT-21

COHEN, ZACHARY, MD\d
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JUN-21

DAIRO, BRANDON, MD\d
Provider ID: N/A
3231 WARING CT STE K
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JAN-23

FISHER, CASEY, MD
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JUN-19

FISHER, CASEY, MD
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

LAWSON, ERIN, MD
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

LAWSON, ERIN, MD
Provider ID: N/A
3142 VISTA WAY STE 207
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

TOWNE, BROOKE, MD
Provider ID: N/A
3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

CARDIAC
ELECTROPHYSIOLOGY

PASHMFOROUSH, MOHAMMAD, MD\d
Provider ID: N/A
2424 VISTA WAY STE 300
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JUN-21

CARDIOVASCULAR
DISEASE

EL SHERIEF, KARIM, MD\d
Provider ID: N/A
3230 WARING CT STE O
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

KABRA, ASHISH, MD\d
Provider ID: N/A
3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-AUG-22

RAJAMANICKAM, ANITHA, MD\d
Provider ID: N/A
3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-AUG-22

RAJAMANICKAM, ANITHA, MD\d
Provider ID: N/A
3907 WARING RD STE 3
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SAMANI, PARGOL, MD
Provider ID: N/A
3927 WARING RD STE C
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-DEC-23

SHEREV, DIMITRI, MD
Provider ID: N/A
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-SEP-23

YUNG, AARON, MD\d
Provider ID: N/A
2424 VISTA WAY STE 300
OCEANSIDE, CA 92054
Teleservice
Effective as of 01-JUN-21

CERTIFIED
ACUPUNCTURIST

LIPTON, GREGORY, LAC
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<td><strong>FISHER-GAMEZ, LORI, NP</strong></td>
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<td>Provider ID: N/A</td>
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<td><strong>HALGEDAHL, YI, NP</strong></td>
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<td><strong>HOWELL, AMANDA, NP</strong></td>
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### C1. 網絡內提供者清單

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<thead>
<tr>
<th>医师名称</th>
<th>医师ID</th>
<th>地址</th>
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<td>HOWELL, AMANDA, NP</td>
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<td>KELLEHER, BRIDGET, NP</td>
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<td>NAVA, PETER, NP</td>
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<td>PATEMAN, CAROLYN, NP</td>
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<td>PRITZKER, JOELY, NP</td>
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<td>QUINN, ERIN, NP</td>
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<td>SANTIAGO, AMANDA, NP</td>
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<td>SHAHBAZ, LINNAE, NPF</td>
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<td>KELLY, KATHERINE, CRNM†</td>
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<td>2210 MESA DR STE 5, OCEANSIDE, CA 92054</td>
<td>01-JUL-22</td>
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<td>LASKY, LANA, CRNM</td>
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<td>PERLMAN, TAMARA, CRNM†</td>
<td>N/A</td>
<td>2210 MESA DR STE 5, OCEANSIDE, CA 92054</td>
<td>01-JUL-22</td>
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<td>N/A</td>
<td>2210 MESA DR STE 5, OCEANSIDE, CA 92054</td>
<td>01-JUL-22</td>
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C1. 網絡內提供者清單

專科護理醫師

ZAMORA-FLYR, MARIA, CRNM
Provider ID: N/A
ền 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM
Provider ID: N/A
ền 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM
Provider ID: N/A
ền 818 PIER VIEW WAY
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

CHIROPRACTOR

ANDREWS, BRAD, DC
Provider ID: N/A
ền 619 CROUCH ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†
Provider ID: N/A
ền 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

JU, NATHANIEL, DC†
Provider ID: N/A
ền 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

DERMATOLOGY

AGUIRRE, KRISTEN, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-20

AGUIRRE, KRISTEN, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-21

AGUIRRE, KRISTEN, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-FEB-24

ANGRA, KUNAL, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

ANGRA, KUNAL, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-22

ANGRA, KUNAL, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-NOV-20

ANGRA, KUNAL, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-DEC-21

GILBOA, RUTH, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-MAR-12

GILBOA, RUTH, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

GILBOA, RUTH, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

LEE, HELEN, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-NOV-22

LEE, HELEN, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

ROSS, ANDREW, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-22

ROSS, ANDREW, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

ROSS, ANDREW, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-AUG-20

ROSS, ANDREW, MD†
Provider ID: N/A
ền 3629 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-22

SAMADY, JOSEPH, MD†
Provider ID: N/A
C1. 網絡內提供者清單

專科護理醫師

- **SAMADY, JOSEPH, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-MAR-12

- **SAMADY, JOSEPH, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-AUG-13

- **SAMADY, JOSEPH, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-21

- **SAMADY, JOSEPH, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-09

- **SAMADY, JOSEPH, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-JUL-22

- **SAMADY, JOSEPH, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-22

- **SAMADY, JOSEPH, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-21

- **SAMADY, JOSEPH, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-JUL-22

- **SAMADY, JOSEPH, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-22

- **SIRICHOTIRATANA, MELISSA, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-JAN-23

- **THIELE, JENS, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-MAR-12

- **THIELE, JENS, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-MAR-12

- **THIELE, JENS, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-21

- **THIELE, JENS, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-09

- **THIELE, JENS, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-JUL-22

- **TSE, YARDY, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-21

- **TSE, YARDY, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-JUL-22

- **TSE, YARDY, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-JUL-22

- **VENKAT, ARUN, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-22

- **VENKAT, ARUN, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-21

- **VENKAT, ARUN, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-21

- **VENKAT, ARUN, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-AUG-20

- **VENKAT, ARUN, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-JUL-22

- **VENKAT, ARUN, MD**
  - Provider ID: N/A
  - 3629 VISTA WAY
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-21

- **ENDOCRINOLOGY**
  - **REPRODUCTIVE**

- **COFFLER, MICKEY, MD**
  - Provider ID: N/A
  - 3231 WARING CT STE M
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-21

- **FAMILY PRACTICE**

- **DONNELL, MARTI, MD**
  - Provider ID: N/A
  - 4700 N RIVER RD
    - OCEANSIDE, CA 92057
    - Effective as of 01-NOV-23

- **DONNELL, MARTI, MD**
  - Provider ID: N/A
  - 818 PIER VIEW WAY
    - OCEANSIDE, CA 92054
    - Effective as of 01-NOV-23
C1. 網絡內提供者清單

專科護理醫師

DONNELL, MARTI, MD
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054* Effective as of 01-NOV-23

MARTINEZ, LESLY, MD
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057* Effective as of 01-APR-23

MARTINEZ, LESLY, MD
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054* Effective as of 01-APR-23

PANICKER, CIBU, MD
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057 Effective as of 01-SEP-18

PUDOL, CHRISTOPHER, DO
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057* Teleservice Effective as of 01-MAR-24

VIDAL, MONICA, DO†
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054* Effective as of 01-AUG-22

VIDAL, MONICA, DO†
Provider ID: N/A
818 PIER VIEW WAY
OCEANSIDE, CA 92054* Effective as of 01-AUG-22

FAMILY PRACTICE
SPORTS MEDICINE

STARK, ERIK, MD†
Provider ID: N/A
3905 WARING RD
OCEANSIDE, CA 92056 Teleservice Effective as of 01-SEP-21

GASTROENTEROLOGY

CHIAO, HELLEN, MD†
Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056 Effective as of 01-JAN-21

CHIAO, HELLEN, MD†
Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056 Effective as of 01-SEP-21

CHIAO, HELLEN, MD†
Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056 Effective as of 01-SEP-21

DEVEREAUX, CHRISTOPHER, MD†
Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056 Effective as of 01-MAR-01

DEVEREAUX, CHRISTOPHER, MD†
Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056 Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†
Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056 Effective as of 01-JAN-21

DEVEREAUX, CHRISTOPHER, MD†
Provider ID: N/A
3923 WARING RD STE A
OCEANSIDE, CA 92056 Effective as of 01-JAN-21
**C1. 網絡內提供者清單**

**專科護理醫師**

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<td>DEVEREAUX, CHRISTOPHER, MD†</td>
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<td>KROL, THOMAS, MD†</td>
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<td>SHIM, MICHAEL, MD†</td>
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<td>SHIM, MICHAEL, MD†</td>
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<td>VIERNES, MATTHEW, MD†</td>
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<td>VIERNES, MATTHEW, MD†</td>
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<td>N/A</td>
<td>3923 WARING RD STE A OCEANSIDE, CA 92056</td>
<td>Effective as of 01-SEP-01</td>
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C1. 網絡內提供者清單

专科護理醫師

**GYNECOLOGIC ONCOLOGY**

ESKANDER, RAMEZ, MD†
Provider ID: N/A
.locations[0].city = OCEANSIDE
.locations[0].state = CA
.locations[0].postalCode = 92056
Effective as of 01-JUL-21

LIU, ANDREW, MD
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92056
Effective as of 01-SEP-21

**HEMATOLOGY / ONCOLOGY**

SINGH, HIMANI, MD†
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92056
Effective as of 01-SEP-21

SINGH, HIMANI, MD†
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92056
Effective as of 01-SEP-23

**INTERNAL MEDICINE**

KCHARADJIAN, TALAR, MD†
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92056
Teleservice
Effective as of 01-SEP-22

KCHARADJIAN, TALAR, MD†
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92056
Teleservice
Effective as of 01-OCT-21

**INTERVENTIONAL CARDIOLOGY**

MOUSSAVIAN, MEHRAN, DO†
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92054
Effective as of 01-OCT-21

**LICENSED CLINICAL SOCIAL WORKER**

ACOSTA, AZUCENA, LCSW
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92057
Teleservice
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92057
Teleservice
Effective as of 01-JAN-24

ACOSTA, AZUCENA, LCSW
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92057
Teleservice
Effective as of 01-JAN-24

CRUZ, VANESSA, LCSW
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92057
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92057
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92057
Effective as of 01-JAN-24

DOUGHERTY, CHRISTINE, LCSW
Provider ID: N/A
.locations[0].city = OCEANSIDE
(locations[0].state = CA)
.locations[0].postalCode = 92057
Effective as of 01-JAN-24
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<th>Provider ID: N/A</th>
<th>517 N HORNE ST</th>
<th>OCEANSIDE, CA 92054</th>
<th>Effective as of 01-JAN-24</th>
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<tbody>
<tr>
<td>DOUGHERTY, CHRISTINE, LCSW</td>
<td>Provider ID: N/A</td>
<td>818 PIER VIEW WAY</td>
<td>OCEANSIDE, CA 92054</td>
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<tr>
<td>GODINEZ, BRENDA, LCSW</td>
<td>Provider ID: N/A</td>
<td>818 PIER VIEW WAY</td>
<td>OCEANSIDE, CA 92054</td>
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<tr>
<td>GODINEZ, BRENDA, LCSW</td>
<td>Provider ID: N/A</td>
<td>517 N HORNE ST</td>
<td>OCEANSIDE, CA 92054</td>
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<tr>
<td>MENDEZ, ADRIANA, LCSW</td>
<td>Provider ID: N/A</td>
<td>517 N HORNE ST</td>
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<tr>
<td>MENDEZ, ADRIANA, LCSW</td>
<td>Provider ID: N/A</td>
<td>517 N HORNE ST</td>
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<tr>
<td>MENDEZ, ADRIANA, LCSW</td>
<td>Provider ID: N/A</td>
<td>4700 N RIVER RD</td>
<td>OCEANSIDE, CA 92057</td>
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<tr>
<td>SMITH, SONYA, LCSW</td>
<td>Provider ID: N/A</td>
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<tr>
<td>SMITH, SONYA, LCSW</td>
<td>Provider ID: N/A</td>
<td>818 PIER VIEW WAY</td>
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<td>SMITH, SONYA, LCSW</td>
<td>Provider ID: N/A</td>
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<tr>
<td>WILSON, CARLENE, LCSW</td>
<td>Provider ID: N/A</td>
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<td>ZAPPONE, ALIDA, LCSW</td>
<td>Provider ID: N/A</td>
<td>818 PIER VIEW WAY</td>
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<tr>
<td>ZAPPONE, ALIDA, LCSW</td>
<td>Provider ID: N/A</td>
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<td>ZAPPONE, ALIDA, LCSW</td>
<td>Provider ID: N/A</td>
<td>818 PIER VIEW WAY</td>
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<td>ZAPPONE, ALIDA, LCSW</td>
<td>Provider ID: N/A</td>
<td>517 N HORNE ST</td>
<td>OCEANSIDE, CA 92054</td>
</tr>
</tbody>
</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

MEYERHOF, GRETA, MFT
Provider ID: N/A
纳税 517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

MEYERHOF, GRETA, MFT
Provider ID: N/A
纳税 4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JAN-24

MEDICAL ONCOLOGY

PAROLY, WARREN, MD
Provider ID: N/A
纳税 3617 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NEPHROLOGY

KHARADJIAN, TALAR, MD
Provider ID: N/A
纳税 3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Teleservice
Effective as of 01-JUN-21

SCHWEIKERT, SUZANNE, MD
Provider ID: N/A
纳税 2210 MESA DR STE 5
OCEANSIDE, CA 92054
Effective as of 01-APR-15

OBSTETRICS / GYNECOLOGY

BINDER, PRATIBHA, MD
Provider ID: N/A
纳税 4002 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

SUNTAY, BERK, MD
Provider ID: N/A
纳税 3998 VISTA WAY STE C
OCEANSIDE, CA 92056
Effective as of 01-JUL-21

OPHTHALMOLOGY

JACOBSEN, BRADLEY, MD
Provider ID: N/A
纳税 3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

NGUYEN, VINCENT, MD
C1. 網絡內提供者清單
専科護理醫師

Provider ID: N/A
3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

NGUYEN, VINCENT, MD†
Provider ID: N/A
3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-APR-20

ROBINSON, FANE, MD†
Provider ID: N/A
3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SHEILS, CATHERINE, MD
Provider ID: N/A
3637 VISTA WAY
OCEANSIDE, CA 92056
Effective as of 01-JAN-24

SMITH, MARK, MD†
Provider ID: N/A
3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-FEB-10

SMITH, MARK, MD†
Provider ID: N/A
3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-SEP-21

SONG, DELU, MD
Provider ID: N/A
3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-JUL-23

SONG, DELU, MD
Provider ID: N/A
3231 WARING CT STE S
OCEANSIDE, CA 92056
Effective as of 01-DEC-23

GEE, JENNIFER, OD
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

GEE, JENNIFER, OD
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

KIM, MICHAEL, OD
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JAN-24

KIM, MICHAEL, OD
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

MORA, WENDY, OD
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

MORA, WENDY, OD
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

MORA, WENDY, OD
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

MORA, WENDY, OD
Provider ID: N/A
517 N HORNE ST
OCEANSIDE, CA 92054
Effective as of 01-JUL-22

RICH, RYAN, OD
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

RICH, RYAN, OD
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

MORA, WENDY, OD
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

MORA, WENDY, OD
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

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4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

RICH, RYAN, OD
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22

RICH, RYAN, OD
Provider ID: N/A
4700 N RIVER RD
OCEANSIDE, CA 92057
Effective as of 01-JUL-22
C1. 網絡內提供者清單

專科護理醫師

- RICH, RYAN, OD
  - Provider ID: N/A
  - 517 N HORNE ST
    - OCEANSIDE, CA 92054
    - Effective as of 01-JAN-24

- RICH, RYAN, OD
  - Provider ID: N/A
  - 517 N HORNE ST
    - OCEANSIDE, CA 92054
    - Effective as of 01-JUL-22

- RING, ROBERT, OD
  - Provider ID: N/A
  - 3998 VISTA WAY STE 204
    - OCEANSIDE, CA 92056
    - Effective as of 01-SEP-22

- TAM, EMILY, OD
  - Provider ID: N/A
  - 517 N HORNE ST
    - OCEANSIDE, CA 92054
    - Effective as of 01-JAN-24

- TAM, EMILY, OD
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  - 517 N HORNE ST
    - OCEANSIDE, CA 92054
    - Effective as of 01-JUL-22

- TAM, EMILY, OD
  - Provider ID: N/A
  - 4700 N RIVER RD
    - OCEANSIDE, CA 92057
    - Effective as of 01-JAN-24

- TAM, EMILY, OD
  - Provider ID: N/A
  - 4700 N RIVER RD
    - OCEANSIDE, CA 92057
    - Effective as of 01-JUL-22

- OTOLARYNGOLOGY

  - BERRY, JULIE, MD
    - Provider ID: N/A
    - 3909 WARING RD STE A
      - OCEANSIDE, CA 92056
      - Effective as of 01-APR-23

  - CARROLL, SARAH, MD
    - Provider ID: N/A
    - 3907 WARING RD STE 1
      - OCEANSIDE, CA 92056
      - Effective as of 01-OCT-21

  - CARROLL, SARAH, MD
    - Provider ID: N/A
    - 3907 WARING RD STE 1
      - OCEANSIDE, CA 92056
      - Effective as of 01-SEP-21

  - CARROLL, SARAH, MD
    - Provider ID: N/A
    - 3907 WARING RD STE 1A
      - OCEANSIDE, CA 92056
      - Effective as of 01-MAY-21

  - JACOBS, ROBERT, MD
    - Provider ID: N/A
    - 3907 WARING RD STE 1
      - OCEANSIDE, CA 92056
      - Effective as of 01-SEP-21

  - JACOBS, ROBERT, MD
    - Provider ID: N/A
    - 3907 WARING RD STE 1A
      - OCEANSIDE, CA 92056
      - Effective as of 01-JUN-99

  - KUSHNARYOV, ANTON, MD
    - Provider ID: N/A
    - 3909 WARING RD STE A
      - OCEANSIDE, CA 92056
      - Effective as of 01-APR-23

  - REISMAN, BRUCE, MD
    - Provider ID: N/A
    - 3907 WARING RD STE 1
      - OCEANSIDE, CA 92056
      - Effective as of 01-JUN-99

- PEDIATRICS

  - CURLEY, EDWARD, MD
    - Provider ID: N/A
    - 2210 MESA DR STE 300
      - OCEANSIDE, CA 92054
      - Effective as of 01-FEB-15

  - RONAN, KEVIN, MD
    - Provider ID: N/A
    - 4700 N RIVER RD
      - OCEANSIDE, CA 92057
      - Effective as of 01-MAY-23

- PHYSICAL MEDICINE / REHABILITATION

  - CURRY, JASON, MD
    - Provider ID: N/A
    - 3905 WARING RD
      - OCEANSIDE, CA 92056
      - Teleservice
      - Effective as of 01-SEP-21

  - FISHER, CASEY, MD
    - Provider ID: N/A
    - 3142 VISTA WAY STE 207
      - OCEANSIDE, CA 92056
      - Effective as of 01-JAN-21

  - PERRIZO, NATHAN, DO
    - Provider ID: N/A
    - 3998 VISTA WAY STE 108
      - OCEANSIDE, CA 92056
      - Effective as of 01-SEP-21

  - RICHARDSON, HENRY, MD
    - Provider ID: N/A
C1. 網絡內提供者清單

**专科護理醫師**

- 3231 WARING CT STE K
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-MAY-23

**PHYSICIANS ASSISTANT**

- BASIN, NATALIE, PA
  Provider ID: N/A
  3629 VISTA WAY
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-DEC-23

- BASIN, NATALIE, PA
  Provider ID: N/A
  3629 VISTA WAY
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-AUG-23

- BECKER, JANTIMA, PA
  Provider ID: N/A
  3629 VISTA WAY
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-APR-24

- BEITTER, KEERSTIN, PA†
  Provider ID: N/A
  3231 WARING CT STE K
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-JAN-23

- BRODSKY, DENNIS, PA
  Provider ID: N/A
  3142 VISTA WAY STE 207
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-FEB-22

- COWAN, JOHN, PA†
  Provider ID: N/A

- GLASSER, DANIEL, PA
  Provider ID: N/A
  605 CROUCH ST
  OCEANSIDE, CA 92054
  Effective as of 01-JUL-22

- PAUL, ROBERT, PA†
  Provider ID: N/A
  3142 VISTA WAY STE 207
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-FEB-22

- POLLINGTON, CHRISTOPHER, PA
  Provider ID: N/A
  3905 WARING RD
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-OCT-23

- RAMOS, ELENA, PA
  Provider ID: N/A
  3905 WARING RD
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  Teleservice
  Effective as of 01-OCT-23

- REUSCH, KEVIN, PA
  Provider ID: N/A
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  Effective as of 01-OCT-23

- SKULSKY, EVA, PA†
  Provider ID: N/A
  3923 WARING RD STE A
  OCEANSIDE, CA 92056
  Effective as of 01-JAN-21

- THOMAS, ROGER, PA
  Provider ID: N/A
  3142 VISTA WAY STE 207
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-SEP-21

- WALLACE, STEPHANIE, PA
  Provider ID: N/A
  4700 N RIVER RD
  OCEANSIDE, CA 92057
  Effective as of 01-FEB-24

- WRIGHT, DEREK, PA
  Provider ID: N/A
  3231 WARING CT STE K
  OCEANSIDE, CA 92056
  Effective as of 01-AUG-23

- WRIGHT, DEREK, PA
  Provider ID: N/A
  3231 WARING CT STE K
  OCEANSIDE, CA 92056
  Effective as of 01-APR-24

**PODIATRIST**

- BOBICK, BRIAN, DPM†
  Provider ID: N/A
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  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-SEP-21

- BOBICK, BRIAN, DPM†
  Provider ID: N/A
  3905 WARING RD
  OCEANSIDE, CA 92056
  Teleservice
  Effective as of 01-SEP-21

- BROOKS, JEFFREY, DPM
  Provider ID: N/A
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<td>520 N COAST HWY STE 103</td>
<td>01-AUG-22</td>
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<td>01-JAN-24</td>
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<td>818 PIER VIEW WAY</td>
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<td>520 N COAST HWY STE 103</td>
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<td>CHAUDHRI, YASHWANT, MD†</td>
<td>520 N COAST HWY STE 103</td>
<td>01-AUG-21</td>
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**Network Provider List**

OCEANSIDE, CA 92054

- HAN, JAMES, DPM
- Provider ID: N/A
- 2119 S EL CAMINO REAL
- OCEANSIDE, CA 92054
- Effective as of 01-DEC-11

- SHIN, HEAMIN, DPM
- Provider ID: N/A
- 3230 WARING CT STE M
- OCEANSIDE, CA 92056
- Effective as of 01-FEB-10

- SPRINGER, DEWAIN, DPM†
- Provider ID: N/A
- 2191 S EL CAMINO REAL STE 101
- OCEANSIDE, CA 92054
- Effective as of 01-JUL-18

**Psychiatry**

- BELL, JENNIFER, DO
- Provider ID: N/A
- 4700 N RIVER RD
- OCEANSIDE, CA 92057
- Effective as of 01-FEB-24

- BELL, JENNIFER, DO
- Provider ID: N/A
- 4700 N RIVER RD
- OCEANSIDE, CA 92057
- Effective as of 01-FEB-24

- CHAUDHRI, YASHWANT, MD†
- Provider ID: N/A
- 520 N COAST HWY STE 103
- OCEANSIDE, CA 92054
- Effective as of 01-AUG-22

**Pulmonary Diseases**

- CORONA, FRANK, MD
- Provider ID: N/A
- 3231 WARING CT STE D
- OCEANSIDE, CA 92056
- Effective as of 01-JUN-99

- CORONA, FRANK, MD
- Provider ID: N/A
- 517 N HORNE ST
- OCEANSIDE, CA 92054
- Teleservice
- Effective as of 01-JAN-24

- PATEL, MITESH, MD
- Provider ID: N/A
- 517 N HORNE ST
- OCEANSIDE, CA 92054
- Teleservice
- Effective as of 01-JAN-24

- PATEL, MITESH, MD
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- 517 N HORNE ST
- OCEANSIDE, CA 92054
- Teleservice
- Effective as of 01-JAN-24

- PATEL, MITESH, MD
- Provider ID: N/A
- 818 PIER VIEW WAY
- OCEANSIDE, CA 92054
- Teleservice
- Effective as of 01-JAN-24

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- 4700 N RIVER RD
- OCEANSIDE, CA 92057
- Effective as of 01-JAN-24

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- Effective as of 01-JAN-24

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- Effective as of 01-JAN-24

- PATEL, MITESH, MD
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- 4700 N RIVER RD
- OCEANSIDE, CA 92057
- Effective as of 01-JAN-24
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<td>3905 WARING RD OCEANSIDE, CA 92056</td>
<td>01-OCT-23</td>
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<td>WILSON, JENNIFER, PT</td>
<td>Rheumatology</td>
<td>N/A</td>
<td>3905 WARING RD OCEANSIDE, CA 92056</td>
<td>01-OCT-21</td>
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<tr>
<td>BEJKO, ETLEVA, MD</td>
<td>Rheumatology</td>
<td>N/A</td>
<td>2424 VISTA WAY STE 120 OCEANSIDE, CA 92054</td>
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*Teleservice (T*) indicates that the provider offers services through telemedicine.
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<th>3998 VISTA WAY STE E</th>
<th>OCEANSIDE, CA 92056</th>
<th>Effective as of 01-JAN-24</th>
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<td>BRION, PAUL, MD</td>
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<td>Provider ID: N/A</td>
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<td>NASSERY, KRISTEN, MD</td>
<td>Provider ID: N/A</td>
<td>3601 VISTA WAY STE 203</td>
<td>OCEANSIDE, CA 92056</td>
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<td>DEEMER, ANDREW, MD</td>
<td>Provider ID: N/A</td>
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<td>JAMSHIDI-NEZHAD, MOHAMMAD, DO</td>
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<td>SURGERY ORTHOPEDIC</td>
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<td>AMORY, DAVID, MD</td>
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<td>DAUGHERTY, DAVID, MD</td>
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<td>KANE, NORMAN, MD</td>
<td>Provider ID: N/A</td>
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<td>HARTMAN, ANDREW, MD</td>
<td>Provider ID: N/A</td>
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<td>STARK, ERIK, MD</td>
<td>Provider ID: N/A</td>
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<tr>
<td>WU, DARRELL, MD</td>
<td>Provider ID: N/A</td>
<td>3156 VISTA WAY STE 100</td>
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</tbody>
</table>
### UROLOGY

**BOONJINDASUP, AARON, MD**  
Provider ID: N/A  
3907 WARING RD STE 4  
OCEANSIDE, CA 92056  
Effective as of 01-SEP-21

**FRASIER, BRADLEY, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-JAN-21

**FRASIER, BRADLEY, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-SEP-21

**FRASIER, BRADLEY, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-JUN-99

**GUERENA, MICHAEL, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-SEP-21

**GUERENA, MICHAEL, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-JUN-99

**GUERENA, MICHAEL, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-SEP-21

**PHILLIPS, JASON, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-SEP-22

**PHILLIPS, JASON, MD**  
Provider ID: N/A  
3907 WARING RD STE 4  
OCEANSIDE, CA 92056  
Effective as of 01-JUN-99

**PHILLIPS, JASON, MD**  
Provider ID: N/A  
3907 WARING RD STE 4  
OCEANSIDE, CA 92056  
Effective as of 01-JAN-15

**SHAPIRO, ROBERT, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-AUG-23

**VILCHIS, CAROLINE, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-SEP-21

**VILCHIS, CAROLINE, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-DEC-13

**VILCHIS, CAROLINE, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-JAN-21

**VILCHIS, CAROLINE, MD**  
Provider ID: N/A  
3609 VISTA WAY  
OCEANSIDE, CA 92056  
Effective as of 01-SEP-21

**CERTIFIED NURSE PRACTITIONER**

**ADDO, BELINDA, NP**  
Provider ID: N/A  
524 W 4TH ST STE B  
PERRIS, CA 92570  
Effective as of 01-OCT-22

**CHIROPRACTOR**

**SCHRIEFER, NOAH, DC**  
Provider ID: N/A  
1675 N PERRIS BLVD STE G  
PERRIS, CA 92571  
Effective as of 01-SEP-22

**TRAINER, JASON, DC**  
Provider ID: N/A  
1675 N PERRIS BLVD STE G1  
PERRIS, CA 92571  
Effective as of 01-JUL-22

**NEUROLOGY CHILD**

**ARCA, CHRIS, MD**  
Provider ID: N/A  
215 W 4TH ST  
PERRIS, CA 92570  
Effective as of 01-NOV-23

**PEDIATRICS**

**LEE, ALAN, MD**  
Provider ID: N/A  
215 W 4TH ST  
PERRIS, CA 92570*  
Effective as of 01-AUG-20

**LEE, ALAN, MD**  
Provider ID: N/A  
215 W 4TH ST  
PERRIS, CA 92570*  
Effective as of 01-AUG-20

**PREVENTATIVE MEDICINE GENERAL**

**LAFONTANT, JEAN, MD**  
Provider ID: N/A  
524 W 4TH ST STE B  
PERRIS, CA 92570  
Effective as of 01-SEP-22
C1. 網絡內提供者清單
專科護理醫師

LAFONTANT, JEAN, MD†
Provider ID: N/A
524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-SEP-22

LAFONTANT, JEAN, MD†
Provider ID: N/A
524 W 4TH ST STE B
PERRIS, CA 92570
Effective as of 01-JAN-21

ANESTHESIOLOGY

PRASAD, RUPA, MD†
Provider ID: N/A
15611 POMERADO RD STE 505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

CARDIOVASCULAR DISEASE

NANAVATI, VIMAL, MD
Provider ID: N/A
15706 POMERADO RD STE 104
POWAY, CA 92064
Effective as of 01-FEB-23

SHEREV, DIMITRI, MD
Provider ID: N/A
15708 POMERADO RD STE N-205
POWAY, CA 92064
Effective as of 01-SEP-23

ZAKOV, KAMEN, MD†
Provider ID: N/A
15611 POMERADO RD STE 400
POWAY, CA 92064
Teleservice
Effective as of 01-MAR-21

CERTIFIED NURSE PRACTITIONER

BISHOP, LESLIE, NP†
Provider ID: N/A
15611 POMERADO RD STE 505
POWAY, CA 92064
Teleservice
Effective as of 01-MAR-24

FISHER, CASEY, MD
Provider ID: N/A
15725 POMERADO RD STE 201
POWAY, CA 92064

WILLIAMS, SHANTRICE, NP
Provider ID: N/A
13010 POWAY RD
POWAY, CA 92064
Effective as of 01-FEB-24

WRIGHT, KIMBERLY, NP†
Provider ID: N/A
15611 POMERADO RD STE 400
POWAY, CA 92064
Effective as of 01-SEP-22

DERMATOLOGY

ARMSTRONG, PATRICK, MD
Provider ID: N/A
15721 POMERADO RD STE 300
POWAY, CA 92064
Effective as of 01-MAR-24

BROGAN, JACQUELINE, MD
Provider ID: N/A
15725 POMERADO RD STE 102
POWAY, CA 92064
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<th>Provider ID</th>
<th>Name</th>
<th>Address</th>
<th>Medical Specialties</th>
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<tr>
<td>N/A</td>
<td>CELANO, NICHOLAS, MD</td>
<td>15725 POMERADO RD STE 102, POWAY, CA 92064</td>
<td>Endocrinology, Metabolism Diabetes</td>
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<td>N/A</td>
<td>CHIANG, JENNIFER, MD</td>
<td>15725 POMERADO RD STE 102, POWAY, CA 92064</td>
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<td>CHEN, ANDREW, MD</td>
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</table>

Your PCP's provider group may have their own network providers for mental health services. Please refer to the list below. You can directly contact these providers. Please note, certain services may require mental health providers to obtain Blue Shield prior authorization before they can be covered.

To access mental health provider list online, please visit blueshieldca.com/fad.
MOOLANI, UJJALA, MD
Provider ID: N/A
15708 POMERADO RD STE N-205
POWAY, CA 92064
Effective as of 01-MAY-23

REDDY, SMITHA, MD†
Provider ID: N/A
15725 POMERADO RD STE 117
POWAY, CA 92064
Effective as of 01-JAN-23

REDDY, SMITHA, MD†
Provider ID: N/A
15725 POMERADO RD STE 117
POWAY, CA 92064
Effective as of 01-JAN-21

REDDY, SMITHA, MD†
Provider ID: N/A
15725 POMERADO RD STE 117
POWAY, CA 92064
Effective as of 01-JAN-21

THAPER, MOHINDERPAL, MD†
Provider ID: N/A
15611 POMERADO RD STE 575
POWAY, CA 92064
Effective as of 01-FEB-24

INTerventional Cardiology

BAYAT, HAMED, MD†
Provider ID: N/A
15611 POMERADO RD STE 400
POWAY, CA 92064
Effective as of 01-SEP-22

MULVIHILL, DANIEL, MD†
Provider ID: N/A
15611 POMERADO RD FL 4
POWAY, CA 92064
Effective as of 01-SEP-22

SERRY, ROD, MD†
Provider ID: N/A
15611 POMERADO RD STE 400
POWAY, CA 92064
Effective as of 01-SEP-22

VANICHSAARN, CHRISTOPHER, MD†
Provider ID: N/A
15611 POMERADO RD STE 400
POWAY, CA 92064
Effective as of 01-MAR-24

LICENSED CLINICAL SOCIAL WORKER

BELINSKY, MARIA, LCSW
Provider ID: N/A
13010 POWAY RD
POWAY, CA 92064
Effective as of 01-FEB-24

NEPHROLOGY

AL-DAHHAAN, ZAID, MD
Provider ID: N/A
15708 POMERADO RD STE N-205
POWAY, CA 92064
Effective as of 01-NOV-23

SHAPIRO, MARK, MD†
Provider ID: N/A
15708 POMERADO RD STE N-205
POWAY, CA 92064
Teleservice
Effective as of 01-JUL-22


**NEUROLOGY**

**DELANEY, MICHAEL, MD†**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Teleservice  
Effective as of 01-JAN-21

**DELANEY, MICHAEL, MD†**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Teleservice  
Effective as of 01-JAN-21

**DELANEY, MICHAEL, MD†**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Teleservice  
Effective as of 01-AUG-19

**FARNSWORTH, WILLIAM, MD†**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Teleservice  
Effective as of 01-AUG-19

**FARNSWORTH, WILLIAM, MD†**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Teleservice  
Effective as of 01-FEB-22

**FARNSWORTH, WILLIAM, MD†**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Teleservice  
Effective as of 01-AUG-23

**WANG, ANCHI, MD‡**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Effective as of 01-JAN-21

**WANG, CHUNYANG, MD‡**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Effective as of 01-NOV-23

**WANG, CHUNYANG, MD‡**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Effective as of 01-JAN-24

**OBSTETRICS / GYNECOLOGY**

**FAN, LI, MD†**  
Provider ID: N/A  
15525 POMERADO RD STE C1  
POWAY, CA 92064  
Effective as of 01-OCT-23

**LUHAR, RIYA, DO**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Teleservice  
Effective as of 01-NOV-21

**LUHAR, RIYA, DO**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Teleservice  
Effective as of 01-AUG-19

**LUHAR, RIYA, DO**  
Provider ID: N/A  
15611 POMERADO RD STE 505  
POWAY, CA 92064  
Teleservice  
Effective as of 01-JAN-21

**LOZIER, JEFFREY, MD†**  
Provider ID: N/A  
15611 POMERADO RD STE 400  
POWAY, CA 92064  
Effective as of 01-SEP-22

**OPTOMETRIST**

**KIM, MICHELLE, OD**  
Provider ID: N/A  
15611 POMERADO RD STE 400  
POWAY, CA 92064  
Effective as of 01-SEP-22

**PHYSICAL MEDICINE / REHABILITATION**

**BULLOCK, ANDREW, DO†**  
Provider ID: N/A  
15644 POMERADO RD STE 204  
POWAY, CA 92064  
Effective as of 01-SEP-22

**BULLOCK, ANDREW, DO†**  
Provider ID: N/A  
15644 POMERADO RD STE 204  
POWAY, CA 92064  
Effective as of 01-JAN-21

**BULLOCK, ANDREW, DO†**  
Provider ID: N/A  
15644 POMERADO RD STE 204  
POWAY, CA 92064  
Effective as of 01-JAN-21
C1. 網絡內提供者清單

網絡內提供者清冊

204
POWAY, CA 92064
Effective as of 01-JUL-22

FISHER, CASEY, MD
Provider ID: N/A

TAHAEI, SEYED, MD†
Provider ID: N/A

PHYSICIANS ASSISTANT
ASTOURIAN, PATRICK, PA†
Provider ID: N/A

CAMERON, KENDALL, PA
Provider ID: N/A

CHATFIELD, ALEXANDRA, PA†
Provider ID: N/A

GRINDLE, SILVIA, PA†
Provider ID: N/A

HUANG, STEPHANIE, PA†
Provider ID: N/A

RAHIM, ARIANNA, PA
Provider ID: N/A

WEBB, SHANNON, PA
Provider ID: N/A

PODIATRIST
BANKS, JAMINELLI, DPM†
Provider ID: N/A

CHU, ANDREW, DPM†
Provider ID: N/A

CHU, ANDREW, DPM†
Provider ID: N/A

SMITH, COLLIN, DPM†
Provider ID: N/A

SMITH, COLLIN, DPM†
Provider ID: N/A

SMITH, COLLIN, DPM†
Provider ID: N/A

HAN, KYOUNG, DPM
Provider ID: N/A

NEGRON, RICARDO, DPM
Provider ID: N/A

READ, TRENTON, DPM
Provider ID: N/A

SMITH, COLLIN, DPM²
Provider ID: N/A

577
C1. 網絡內提供者清單
专科護理醫師

**PSYCHIATRY**

ANDERSEN, CLAIRE, MD
Provider ID: N/A
网站地图：13020 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD
Provider ID: N/A
网站地图：13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-21

MODHWADIA, MAMTA, MD
Provider ID: N/A
网站地图：13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-21

PSYCHOLOGIST

KAUP, ALLISON, PhD†
Provider ID: N/A
网站地图：15611 POMERADO RD STE 505
POWAY, CA 92064
Teleservice
Effective as of 01-FEB-24

MEJIAS, JUAN, PhD
Provider ID: N/A
网站地图：13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-24

PSYCHIATRY CHILD

ANDERSEN, CLAIRE, MD
Provider ID: N/A
网站地图：13020 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-21

ANDERSEN, CLAIRE, MD
Provider ID: N/A
网站地图：13020 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-21

MEJIAS, JUAN, PhD
Provider ID: N/A
网站地图：13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-24

POSTLETHWAITE,
ALEJANDRA, MD†
Provider ID: N/A
网站地图：13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-24

KAUP, ALLISON, PhD†
Provider ID: N/A
网站地图：15611 POMERADO RD STE 505
POWAY, CA 92064
Teleservice
Effective as of 01-FEB-24

KAUP, ALLISON, PhD†
Provider ID: N/A
网站地图：15611 POMERADO RD STE 505
POWAY, CA 92064
Teleservice
Effective as of 01-NOV-23

KAUP, ALLISON, PhD†
Provider ID: N/A
网站地图：15611 POMERADO RD STE 505
POWAY, CA 92064
Teleservice
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA,
PhD
Provider ID: N/A
网站地图：13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA,
PhD
Provider ID: N/A
网站地图：13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-24

VALLEZ-BARLAM, ANDREA,
PhD
Provider ID: N/A
网站地图：13010 POWAY RD
POWAY, CA 92064
Effective as of 01-DEC-23

VALLEZ-BARLAM, ANDREA,
PhD
Provider ID: N/A
网站地图：13010 POWAY RD
POWAY, CA 92064
Effective as of 01-JAN-24

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
Vallez-Barlam, Andrea, PhD  
Provider ID: N/A  
13010 Poway Rd  
Poway, CA 92064  
Effective as of 01-DEC-23

Rheumatology

Rao, Soumya, MD†  
Provider ID: N/A  
15611 Pomerado RdSTE 400  
Poway, CA 92064  
Effective as of 01-SEP-22

Reddy, Smitha, MD†  
Provider ID: N/A  
15725 Pomerado RdSTE 117  
Poway, CA 92064  
Effective as of 01-SEP-22

Family Practice

Hardison, Charles, MD†  
Provider ID: N/A  
211 13th St  
Ramona, CA 92065  
Effective as of 01-SEP-22

Pediatrics

Yung, Doris, MD†  
Provider ID: N/A  
220 Rotanzi St  
Ramona, CA 92065  
Effective as of 01-DEC-18

Urology

Anthony, Julian, MD  
Provider ID: N/A  
15611 Pomerado Rd FL 4  
Poway, CA 92064  
Effective as of 01-MAR-24

Chiropractor

Pierson, Michael, DC  
Provider ID: N/A  
22411 Antonio Pkwy Ste C215  
Rancho Santa Margarita, CA 92688  
Effective as of 01-JAN-18

Dermatology

Dicesare, Daniel, MD  
Provider ID: N/A  
22032 El Paseo Ste 150  
Rancho Santa Margarita, CA 92688  
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Registered Physical Therapist

Bouettele, David, PT  
Provider ID: N/A  
850 Main St Ste 105  
Ramona, CA 92065  
Effective as of 01-FEB-24

Bouettele, Barbara, PT  
Provider ID: N/A  
850 Main St Ste 105  
Ramona, CA 92065  
Effective as of 01-FEB-24
C1. 網絡內提供者清單
專科護理醫師

RANCHO SANTA MARGARITA, CA 92688
Effective as of 01-JAN-17

GUIDE, SHIREEN, MD‡
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29829 SANTA MARGARITA PKWY STE 500
RANCHO SANTA MARGARITA, CA 92688
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GUIDE, SHIREEN, MD‡
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29829 SANTA MARGARITA PKWY STE 500
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GUIDE, SHIREEN, MD‡
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29829 SANTA MARGARITA PKWY STE 500
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GUIDE, SHIREEN, MD‡
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29829 SANTA MARGARITA PKWY STE 500
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Effective as of 01-AUG-12

GUIDE, SHIREEN, MD‡
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29829 SANTA MARGARITA PKWY STE 500
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GUIDE, SHIREEN, MD‡
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29829 SANTA MARGARITA PKWY STE 500
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Effective as of 01-JUL-21

GUIDE, SHIREEN, MD‡
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29829 SANTA MARGARITA PKWY STE 500
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GUIDE, SHIREEN, MD‡
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29829 SANTA MARGARITA PKWY STE 500
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LEVIN, JACQUELINE, DO‡
Provider ID: N/A
22032 EL PASEO STE 220
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LEVIN, JACQUELINE, DO‡
Provider ID: N/A
22032 EL PASEO STE 220
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Effective as of 01-OCT-23

LEVIN, JACQUELINE, DO‡
Provider ID: N/A
22032 EL PASEO STE 220
RANCHO SANTA MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO‡
Provider ID: N/A
22032 EL PASEO STE 220
RANCHO SANTA MARGARITA, CA 92688
Effective as of 01-NOV-21

LEVIN, JACQUELINE, DO‡
Provider ID: N/A
22032 EL PASEO STE 220
RANCHO SANTA MARGARITA, CA 92688
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SHIELL, RONALD, MD‡
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22032 EL PASEO STE 220
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SHIELL, RONALD, MD‡
Provider ID: N/A
22032 EL PASEO STE 220
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WANG, JAMES, MD‡
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29833 SANTA MARGARITA PKWY STE 100
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WANG, JAMES, MD‡
Provider ID: N/A
29833 SANTA MARGARITA PKWY STE 100
C1. 網絡內提供者清單

**METABOLISM DIABETES**

HAMIDI, AFSHIN, MD
Provider ID: N/A

- 30511 AVENIDA DE LAS FLORES
  - # 1064
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**ENDOCRINOLOGY**

WANG, JAMES, MD†
Provider ID: N/A

- 29833 SANTA MARGARITA PKWY STE 100
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**INTERNAL MEDICINE**

GORE, GWENDOLYN, MD†
Provider ID: N/A

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  - RANCHO SANTA MARGARITA, CA 92688
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**PODIATRIST**

ANGAROLA, JEFF, DPM
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Effective as of 01-JAN-22

**PHYSICIANS ASSISTANT**

KANE, KARA, PA†
Provider ID: N/A

- 22032 EL PASEO STE 220

581
C1. 網絡內提供者清單

網絡內提供者清單

C1. 專科護理醫師

ANGAROLA, JEFF, DPM
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지도 29472 AVENIDA DE LAS BANDERA
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ANESTHESIOLOGY

GERAYLI, AFSHIN, MD†
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GERAYLI, AFSHIN, MD†
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SAN CLEMENTE, CA 92673
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GERAYLI, AFSHIN, MD†
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SAN CLEMENTE, CA 92673
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MaaSumi, KaSra, MD
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지도 30212 TOMAS STE 180 RANCHO SANTA MARG, CA 92688
Teleservice
Effective as of 01-FEB-24

MAASUMI, KASRA, MD
Provider ID: N/A
지도 30212 TOMAS STE 180 RANCHO STA MARG, CA 92688
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ALLERGY IMMUNOLOGY

DYER, MARC, MD
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BETTS, ANDRES, MD†
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BETTS, ANDRES, MD†
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MOUSAVI, SHAHRYAR, MD
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CARDIAC
C1. 網絡內提供者清單

**CERTIFIED NURSE PRACTITIONER**

PARK, SE, NP
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ORITY CAMINO MIRA COSTA STE A
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POLIZZI, BRITTANY, NP
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1300 AVENIDA VISTA
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WONG, KRYSTLE, NP
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1031 AVENIDA PICO STE 203

**ELECTROPHYSIOLOGY**

DRURY, PAUL, MD
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724 S EL CAMINO REAL
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**CHIROPRACCTOR**

THOMPSON, RUSSELL, DC
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629 CAMINO DE LOS MARES STE 104
SAN CLEMENTE, CA 92673
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**CARDIOVASCULAR DISEASE**

KUO, ALLEN, MD
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**DERMATOLOGY**

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CARLIN, CHRISTOPHER, MD
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FOREMAN, TANYA, MD
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C1. 網絡內提供者清單

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GUIDE, SHIREEN, MD†
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629 CAMINO DE LOS MARES STE 105
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GUIDE, SHIREEN, MD†
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RILEY, JESSICA, DO†
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RILEY, JESSICA, DO†
Provider ID: N/A
1300 AVENIDA VISTA
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SAN CLEMENTE, CA 92673
Effective as of 01-OCT-18

RILEY, JESSICA, DO†
Provider ID: N/A
1300 AVENIDA VISTA
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SAN CLEMENTE, CA 92673
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RILEY, JESSICA, DO†
Provider ID: N/A
1300 AVENIDA VISTA
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SAN CLEMENTE, CA 92673
Effective as of 01-OCT-18

RILEY, JESSICA, DO†
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-MAR-23

RILEY, JESSICA, DO†
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-17

RILEY, JESSICA, DO†
Provider ID: N/A
1300 AVENIDA VISTA
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SAN CLEMENTE, CA 92673
Effective as of 01-JAN-16

RILEY, JESSICA, DO†
Provider ID: N/A
1300 AVENIDA VISTA
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SHIELL, RONALD, MD†
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1300 AVENIDA VISTA
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SHIELL, RONALD, MD†
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1300 AVENIDA VISTA
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Teleservice
Effective as of 01-MAR-19

SHIELL, RONALD, MD†
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 150
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Teleservice
Effective as of 01-SEP-18

SHIELL, RONALD, MD†
Provider ID: N/A
1300 AVENIDA VISTA
HERMOSA STE 150
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Teleservice
Effective as of 01-OCT-23

GASTROENTEROLOGY

GUJRAL, NAVJYOT, MD†
Provider ID: N/A
655 CAMINO LOS MARES 123
SAN CLEMENTE, CA 92673
Effective as of 01-APR-11

GUJRAL, NAVJYOT, MD†
Provider ID: N/A
655 CAMINO LOS MARES 123
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-12

HASSANEIN, TAREK, MD†
Provider ID: N/A
675 CAMINO DE LOS MARES STE 301
SAN CLEMENTE, CA 92673
Effective as of 01-MAY-22

HAASSANEIN, TAREK, MD†
Provider ID: N/A

675 CAMINO DE LOS MARES STE 301
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

ROSSARO, LORENZO, MD†
Provider ID: N/A

724 S EL CAMINO REAL
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Effective as of 01-SEP-19

ROSSARO, LORENZO, MD†
Provider ID: N/A

724 S EL CAMINO REAL
SAN CLEMENTE, CA 92672
Effective as of 01-SEP-20

KUO, ALLEN, MD†
Provider ID: N/A

638 CAMINO DE LOS MARES STE D4
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

PATEL, HITESH, MD†
Provider ID: N/A

638 CAMINO DE LOS MARES STE D4
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PATEL, HITESH, MD†
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638 CAMINO DE LOS MARES STE D4
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Effective as of 01-SEP-20

VAN, HO HAI, MD†
Provider ID: N/A

724 S EL CAMINO REAL
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NEUROLOGY

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638 CAMINO DE LOS MARES STE D4
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Effective as of 01-DEC-21

PATEL, HITESH, MD†
Provider ID: N/A

638 CAMINO DE LOS MARES STE D4
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Effective as of 01-DEC-21

PATEL, HITESH, MD†
Provider ID: N/A

638 CAMINO DE LOS MARES STE D4
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Effective as of 01-DEC-21

PATEL, HITESH, MD†
Provider ID: N/A

638 CAMINO DE LOS MARES STE D4
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Effective as of 01-DEC-21

PATEL, HITESH, MD†
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638 CAMINO DE LOS MARES STE D4
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Effective as of 01-DEC-21

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Provider ID: N/A

638 CAMINO DE LOS MARES STE D4
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PATEL, HITESH, MD†
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638 CAMINO DE LOS MARES STE D4
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Effective as of 01-DEC-21
C1. 網絡內提供者清單

專科護理醫師

**OBSTETRICS / GYNECOLOGY**

**BAILEY, THOMAS, MD**
Provider ID: N/A

665 CAMINO LOS MARES
SAN CLEMENTE, CA 92673
Effective as of 01-DEC-21

**RAMIREZ, SARA, MD**
Provider ID: N/A

665 CAMINO DE LOS MARES
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-10

**BAILEY, THOMAS, MD**
Provider ID: N/A

665 CAMINO LOS MARES
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Effective as of 01-MAR-01

**BAILEY, THOMAS, MD**
Provider ID: N/A

665 CAMINO LOS MARES
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**JOHNSON, SUSAN, MD**
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1031 AVENIDA PICO STE 204
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**JOHNSON, SUSAN, MD**
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**SALCIDO, CRAIG, MD**
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665 CAMINO DE LOS MARES
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**SALCIDO, CRAIG, MD**
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665 CAMINO DE LOS MARES
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**OPHTHALMOLOGY**

**AHMAD, ASHRAF, MD**
Provider ID: N/A

665 CAMINO DE LOS MARES
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**AHMAD, ASHRAF, MD**
Provider ID: N/A

665 CAMINO DE LOS MARES
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**BANUELOS, LYDIA, MD**
Provider ID: N/A

653 CAMINO DE LOS MARES STE 103
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**DHOOT, SONIA, MD**
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
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**DHOOT, SONIA, MD**
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
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**GUJRAL, SATVINDER, MD**
Provider ID: N/A

665 CAMINO DE LOS MARES STE 102
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Effective as of 01-OCT-23
### C1. 網絡內提供者清單

<table>
<thead>
<tr>
<th>医师姓名</th>
<th>机构地址</th>
<th>医师ID</th>
<th>有效日期</th>
</tr>
</thead>
<tbody>
<tr>
<td>GUJRAL, SATVINDER, MD†</td>
<td>665 CAMINO DE LOS MARES STE 102 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-OCT-23</td>
</tr>
<tr>
<td>GWYNN, DAVID, MD</td>
<td>665 CAMINO DE LOS MARES STE 102 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-SEP-22</td>
</tr>
<tr>
<td>GWYNN, DAVID, MD</td>
<td>653 CAMINO DE LOS MARES STE 103 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-FEB-23</td>
</tr>
<tr>
<td>GWYNN, DAVID, MD</td>
<td>665 CAMINO LOS MARES 102 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-OCT-23</td>
</tr>
<tr>
<td>GWYNN, DAVID, MD</td>
<td>665 CAMINO LOS MARES 102 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-MAY-23</td>
</tr>
<tr>
<td>JACOBS, JEFFREY, MD†</td>
<td>665 CAMINO LOS MARES 102 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-APR-23</td>
</tr>
<tr>
<td>JACOBS, JEFFREY, MD†</td>
<td>653 CAMINO LOS MARES 107 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-MAY-12</td>
</tr>
<tr>
<td>JACOBS, JEFFREY, MD†</td>
<td>653 CAMINO DE LOS MARES STE 103 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-MAY-23</td>
</tr>
<tr>
<td>JOSON, PETER, MD</td>
<td>653 CAMINO LOS MARES 102 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-AUG-22</td>
</tr>
<tr>
<td>JOSON, PETER, MD</td>
<td>653 CAMINO LOS MARES 107 SAN CLEMENTE, CA 92673</td>
<td>N/A</td>
<td>Effective as of 01-AUG-22</td>
</tr>
</tbody>
</table>
C1. 網絡內提供者清單

網絡內提供者清單

专科護理醫師

MARES STE 103
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Effective as of 01-OCT-17

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653 CAMINO LOS MARES
107
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Effective as of 01-MAR-17

JOSON, PETER, MD
Provider ID: N/A
653 CAMINO DE LOS MARES
107
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

JOSON, PETER, MD
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653 CAMINO LOS MARES
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Effective as of 01-AUG-22

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653 CAMINO DE LOS MARES
STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KIM, BRIAN, MD²
Provider ID: N/A
653 CAMINO DE LOS MARES
STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

KIM, EDWARD, MD²
Provider ID: N/A
653 CAMINO DE LOS MARES
STE 103
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-JUN-21

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

TEYMOORIAN, SAVAK, MD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-22

WANG, YE, MD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

WANG, YE, MD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-NOV-19

OPTOMETRIST

CHOI-SIRIRATARIWAT, ISABELL, OD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

CHOI-SIRIRATARIWAT, ISABELL, OD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-JUN-19

LEIGHT, TERRA, OD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

LEIGHT, TERRA, OD†
Provider ID: N/A
685 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-22

NG, REBECCA, OD†
Provider ID: N/A
653 CAMINO DE LOS MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-23

NG, REBECCA, OD†
Provider ID: N/A
653 CAMINO DE LOS MARES STE 107
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

STEFANIDIS, NICOLETTA, OD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-18

TERADA, SEIJU, OD
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-22

TERADA, SEIJU, OD
653 CAMINO LOS MARES 103
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-11

685 CAMINO LOS MARES 102
SAN CLEMENTE, CA 92673
Effective as of 01-SEP-18

589
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

OTOLARYNGOLOGY

CROCKETT, DENNIS, MD†
Provider ID: N/A
665 CAMINO DE LOS MARES STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-23

PEDIATRICS

DWINELL, LAUREN, MD†
Provider ID: N/A
1300 AVENIDA VISTA HERMOSA STE 200
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

PHYSICIANS ASSISTANT

ESHOIEE, MIRIAM, PA†
Provider ID: N/A
224 AVENIDA DEL MAR STE B
SAN CLEMENTE, CA 92672
Effective as of 01-AUG-20

CROCKETT, DENNIS, MD†
Provider ID: N/A
675 CAMINO DE LOS MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

MOHALE, SHARON, PA†
Provider ID: N/A
1300 AVENIDA VISTA HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-18

WELLS, PHILLIP, MD†
Provider ID: N/A
675 CAMINO DE LOS MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

NELMS, MICHAEL, PA†
Provider ID: N/A
1300 AVENIDA VISTA HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-21

WELLS, PHILLIP, MD†
Provider ID: N/A
675 CAMINO DE LOS MARES STE 420
SAN CLEMENTE, CA 92673
Effective as of 01-OCT-08

NORMAN, STACY, PA
Provider ID: N/A
1300 AVENIDA VISTA HERMOSA STE 150
SAN CLEMENTE, CA 92673
Effective as of 01-AUG-23

SOBHANIAN, SHAHAB, PA
Provider ID: N/A
3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JAN-18

SOBHANIAN, SHAHAB, PA
Provider ID: N/A
3553 CAMINO MIRA COSTA STE A
SAN CLEMENTE, CA 92672
Effective as of 01-JUL-23

WANG, ALICE, PA
Provider ID: N/A
831 VIA SUERTE STE 102
SAN CLEMENTE, CA 92673
Effective as of 01-FEB-24

PODIATRIST

HEHE, KYLE, DPM
Provider ID: N/A
665 CAMINO DE LOS MARES
SAN CLEMENTE, CA 92673
Effective as of 01-JAN-18

HEHE, KYLE, DPM
Provider ID: N/A
665 CAMINO DE LOS MARES
SAN CLEMENTE, CA 92673
Effective as of 01-JUL-19

LEAMING, ROBERT, DPM
Provider ID: N/A
655 CAMINO DE LOS MARES STE 120
SAN CLEMENTE, CA 92673
Teleservice
Effective as of 01-FEB-24

LEAMING, ROBERT, DPM
Provider ID: N/A
655 CAMINO DE LOS MARES STE 120
SAN CLEMENTE, CA 92673
Teleservice
Effective as of 01-FEB-24
### C1. 網絡內提供者清單

#### 專科護理醫師

- **Franklin, Adam, MD**
  - Provider ID: N/A
  - 653 Camino De Los Mares Ste 109
  - San Clemente, CA 92673
  - Effective as of 01-Apr-18

- **Van der Reis, William, MD†**
  - Provider ID: N/A
  - 653 Camino De Los Mares Ste 109
  - San Clemente, CA 92673
  - Effective as of 01-May-12

- **Van der Reis, William, MD†**
  - Provider ID: N/A
  - 653 Camino De Los Mares Ste 109
  - San Clemente, CA 92673
  - Effective as of 01-Apr-11

#### SURGERY HAND

- **Franklin, Adam, MD**
  - Provider ID: N/A
  - 653 Camino De Los Mares Ste 109
  - San Clemente, CA 92673
  - Effective as of 01-Feb-24

#### SURGERY

#### NEUROLOGICAL

- **Patel, Hitesh, MD†**
  - Provider ID: N/A
  - 638 Camino De Los Mares Ste D4
  - San Clemente, CA 92673
  - Effective as of 01-Nov-21

#### SURGERY ORTHOPEDIC

- **Gialamas, Gus, MD**
  - Provider ID: N/A
  - 653 Camino De Los Mares Ste 109
  - San Clemente, CA 92673
  - Effective as of 01-Feb-18

- **Gialamas, Gus, MD**
  - Provider ID: N/A
  - 653 Camino De Los Mares Ste 109
  - San Clemente, CA 92673
  - Effective as of 01-Oct-23

- **Ho, Tammy, MD**
  - Provider ID: N/A
  - 3553 Camino Mira Costa Ste A
  - San Clemente, CA 92672
  - Effective as of 01-Oct-23

- **Kim, Moses, MD**
  - Provider ID: N/A
  - 3553 Camino Mira Costa Ste A
  - San Clemente, CA 92672
  - Effective as of 01-Oct-23

- **Kim, Moses, MD**
  - Provider ID: N/A
  - 3553 Camino Mira Costa Ste A
  - San Clemente, CA 92672
  - Effective as of 01-Jan-23

- **Meaglia, James, MD**
  - Provider ID: N/A
  - 3553 Camino Mira Costa Ste A
  - San Clemente, CA 92672
  - Effective as of 01-Jan-23

- **Meaglia, James, MD**
  - Provider ID: N/A
  - 3553 Camino Mira Costa Ste A
  - San Clemente, CA 92672
  - Effective as of 01-Oct-23

- **Nakamura, Leah, MD**
  - Provider ID: N/A
  - 3553 Camino Mira Costa Ste A
  - San Clemente, CA 92672
  - Effective as of 01-Oct-23

- **Randall, Josh, MD**
  - Provider ID: N/A
  - 3553 Camino Mira Costa Ste A
  - San Clemente, CA 92672
  - Effective as of 01-Oct-23

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*Note: The text above is a translation of the content in the image. The translation is not perfect and may contain errors. The original content is in English.*
C1. 網絡內提供者清單

### 專科護理醫師

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<td>3553 CAMINO MIRA COSTA STE A SAN CLEMENTE, CA 92672</td>
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<td>SPITZ, AARON, MD</td>
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<td>N/A</td>
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<td>N/A</td>
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### ADDICTIVE MEDICINE

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<td>HEINRICI, ALEKA, MD</td>
<td>N/A</td>
<td>286 EUCLID AVE STE 302 SAN DIEGO, CA 92114</td>
<td>01-APR-23</td>
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<tr>
<td>SALGUERO GALLAND, MARIO, MD</td>
<td>N/A</td>
<td>4187 FAIRMOUNT AVE SAN DIEGO, CA 92105 Teleservice</td>
<td>01-JUN-23</td>
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<td>SALGUERO GALLAND, MARIO, MD</td>
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<td>4185 FAIRMOUNT AVE SAN DIEGO, CA 92105 Teleservice</td>
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<td>SALGUERO GALLAND, MARIO, MD</td>
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<td>4157 FAIRMOUNT AVE SAN DIEGO, CA 92105 Teleservice</td>
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<tr>
<td>SALGUERO GALLAND, MARIO, MD</td>
<td>N/A</td>
<td>4175 FAIRMOUNT AVE SAN DIEGO, CA 92105 Teleservice</td>
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### ALLERGY IMMUNOLOGY

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<td>ALKATIB, RHONDA, MD</td>
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<td>2655 CAMINO DEL RIO N STE 425 SAN DIEGO, CA 92108</td>
<td>01-OCT-21</td>
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<td>ALKATIB, RHONDA, MD</td>
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<td>2655 CAMINO DEL RIO N STE 120 SAN DIEGO, CA 92108</td>
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<td>ALKATIB, RHONDA, MD</td>
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### ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

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<tbody>
<tr>
<td>COHEN, GARY, MD</td>
<td>N/A</td>
<td>9833 PACIFIC HEIGHTS BLVD STE J SAN DIEGO, CA 92121</td>
<td>01-OCT-95</td>
</tr>
<tr>
<td>COHEN, GARY, MD</td>
<td>N/A</td>
<td>9833 PACIFIC HEIGHTS BLVD STE J SAN DIEGO, CA 92121</td>
<td>01-OCT-95</td>
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</table>
C1. 網絡內提供者清單
專科護理醫師

- ANESTHESIOLOGY
  - BECERRA SONGOLO, TOSHA, MD
    Provider ID: N/A
    200 W ARBOR DR
    SAN DIEGO, CA 92103
    Effective as of 01-APR-21
  - CHIEN, SHELBY, MD†
    Provider ID: N/A
    5395 RUFFIN RD STE 202
    SAN DIEGO, CA 92123
    Effective as of 01-JAN-21
  - DOBECKI, DOUGLAS, MD†
    Provider ID: N/A
    5395 RUFFIN RD STE 204
    SAN DIEGO, CA 92123
    Effective as of 01-JAN-22
  - FILIPOVIC, MAYA, MD
    Provider ID: N/A
    200 W ARBOR DR
    SAN DIEGO, CA 92103
    Effective as of 01-APR-23
  - FUNDINGSLAND, BRENT, MD†
    Provider ID: N/A
    200 W ARBOR DR
    SAN DIEGO, CA 92103
    Effective as of 01-SEP-23
  - GAYAM, SAJJAN, MD
    Provider ID: N/A
    200 W ARBOR DR
    SAN DIEGO, CA 92103
    Effective as of 01-SEP-23
  - GROVEY, BRITTANY, MD†
    Provider ID: N/A
    8901 ACTIVITY RD STE 100
    SAN DIEGO, CA 92126
    Effective as of 01-OCT-21

- KIM, ALEXANDER, MD
  Provider ID: N/A
  9833 PACIFIC HEIGHTS BLVD STE J
  SAN DIEGO, CA 92121
  Effective as of 01-FEB-07

- MERCANDETTI, ALEX, MD†
  Provider ID: N/A
  16950 VIA TAZON
  SAN DIEGO, CA 92127
  Effective as of 01-JUN-23

- OSTROM, NANCY, MD†
  Provider ID: N/A
  3965 5TH AVE STE 430
  SAN DIEGO, CA 92103
  Effective as of 01-NOV-20

- SHARMA, KUSUM, MD
  Provider ID: N/A
  10672 WEXFORD ST STE 280
  SAN DIEGO, CA 92131
  Effective as of 01-SEP-23

- SHARMA, KUSUM, MD
  Provider ID: N/A
  10672 WEXFORD ST STE 280
  SAN DIEGO, CA 92131
  Effective as of 01-JAN-23

- SHARMA, KUSUM, MD
  Provider ID: N/A
  10672 WEXFORD ST STE 280
  SAN DIEGO, CA 92131
  Effective as of 01-JAN-21

- SHARMA, KUSUM, MD
  Provider ID: N/A
  10672 WEXFORD ST STE 280
  SAN DIEGO, CA 92131
  Effective as of 01-JAN-13

- LEE, GEMAYEL, MD†
  Provider ID: N/A
  8901 ACTIVITY RD STE 104
  SAN DIEGO, CA 92126
  Effective as of 01-OCT-21

- NARLA, VINOD, MD
  Provider ID: N/A
  200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-DEC-23

- NGO, DONALD, MD
  Provider ID: N/A
  200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-DEC-23

- ROY, KEVIN, MD
  Provider ID: N/A
  200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-SEP-23

- SAID, ENGY, MD†
  Provider ID: N/A
  200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-OCT-21

- SAID, ENGY, MD†
  Provider ID: N/A
  16918 DOVE CANYON RD STE 100
  SAN DIEGO, CA 92127
  Effective as of 01-OCT-21

- SUYDAM, STEVEN, MD†
  Provider ID: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
<table>
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<th>Provider ID</th>
<th>Address</th>
<th>City, State</th>
<th>Effective As Of</th>
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<td>200 W ARBOR DR</td>
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<tr>
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**ANESTHESIOLOGY**

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**CRITICAL CARE MEDICINE**

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<td>N/A</td>
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<td>N/A</td>
<td>16466 BERNARDO CENTER DR STE 150</td>
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C1. 網絡內提供者清單

**专科護理醫師**

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**Cardiac Electrophysiology**

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<td>COX, JUSTIN, MD†</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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C1. 網絡內提供者清單

專科護理醫師

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SAN DIEGO, CA 92103
Effective as of 01-JUL-23

NAYAK, KESHAV, MD†
Provider ID: N/A
501 WASHINGTON ST STE 512
SAN DIEGO, CA 92103
Effective as of 01-MAY-19

NGUYEN, TRI, MD†
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4551 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JAN-23

NISHIMURA, MARIN, MD
Provider ID: N/A
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAR-23

OMRAN, JAD, MD
Provider ID: N/A
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-FEB-23

PARIKH, MILIND, DO†
Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

PARIZO, JUSTIN, MD†
Provider ID: N/A
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-21

PATEL, JIGAR, DO
Provider ID: N/A
4060 FOURTH AVENUE, STE 650
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

PROHASKA, THOMAS, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SALAMI, ALI, MD†
Provider ID: N/A
501 WASHINGTON ST STE 512
SAN DIEGO, CA 92103
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SARSAM, LUAY, MD
Provider ID: N/A
292 EUCLID AVE STE 210
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SHAH, KULIN, MD†
Provider ID: N/A
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SAN DIEGO, CA 92103
Effective as of 01-JAN-23

SHEREV, DIMITRI, MD†
Provider ID: N/A
6402 EL CAJON BLVD STE 102
SAN DIEGO, CA 92115
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SUDHAKAR, DEEPTHI, MD†
Provider ID: N/A
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WILLIAMS, JEFFREY, MD
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ZAVARO, SUHAIL, MD
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專科護理醫師

Teleservice
Effective as of 01-NOV-22

SEITZ, GRETCHEN, LAC
Provider ID: N/A
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

SEITZ, GRETCHEN, LAC
Provider ID: N/A
9995 CARMEL MOUNTAIN RD STE B10-B11
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

TANG-RITCHIE, LENG, LAC†
Provider ID: N/A
9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC
Provider ID: N/A
4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC
Provider ID: N/A
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-FEB-24

TANG-RITCHIE, LENG, LAC†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

TANG-RITCHIE, LENG, LAC†
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

CERTIFIED NURSE PRACTITIONER

AGUILA, YESENIA, NP
Provider ID: N/A
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-FEB-24

ALSTEEN, STEPHANIE, NP†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

AMOS, MARIA, NP†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ANTHONY, SHARON, NP†
Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

ASHMAN, ELLEN, NP†
Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

ASHMAN, ELLEN, NP†
Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

ASHMAN, ELLEN, NP†
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

BUI, ANH, NPF
Provider ID: N/A
7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-NOV-23

BURNLEY, BRAEANNE, NP†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CAMAQUIN, MIA, NP
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

CAMARGO-LOWTHERS, ANGELICA, NP†
Provider ID: N/A
8010 FROST ST STE 510
C1. 網絡內提供者清單

專科護理醫師

SAN DIEGO, CA 92123
Effective as of 01-JAN-21

CAMARGO-LOWTHERS, ANGELICA, NP
Provider ID: N/A
8010 FROST ST STE 220
SAN DIEGO, CA 92123
Effective as of 01-JUL-23

CAMARGO-LOWTHERS, ANGELICA, NP†
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

CARDENAS, MIRIAM, NPF
Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CARDENAS, MIRIAM, NPF
Provider ID: N/A
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

CASE, ERINN, NP
Provider ID: N/A
3737 MORAGA AVE STE B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

CELESTIN-ROMSEY, AKANKE, NPF
Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-DEC-21

CHANTALA, ELIZABETH, NP†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHAVEZ, ALEXANDRIA, NP†
Provider ID: N/A
4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

CHEATHAM, BRITTANY, NP†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHEN, KATIE, NP
Provider ID: N/A
4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

CHOATE, BERNADETTE, NP†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

CHOATE, BERNADETTE, NP†
Provider ID: N/A
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Effective as of 01-FEB-24

CONNOR, PAMELA, NP
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CONNOR, CAROLINE, NP†
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-21

CONNOR, CAROLINE, NP†
Provider ID: N/A
6030 VILLAGE WAY
SAN DIEGO, CA 92130
Effective as of 01-JUN-21

CUTLER, APRYL, NP
Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

DE DIOS, SARAH, NP
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

DE LARA, KAROL JOHN, NP
Provider ID: N/A
4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

DE LARA, KAROL JOHN, NP
Provider ID: N/A
4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

DEL VECCHIO, MEGAN, NP
Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

DEL VECCHIO, MEGAN, NP
Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

DHARKAR SURBER, SAPNA, NP
Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DHARKAR SURBER, SAPNA, NP
Provider ID: N/A
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DILLEN, REBECCA, NP
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

DOAN, ANGELA, NP↓
Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

DOAN, ANGELA, NP↓
Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

DRISCOLL, KARRIE, NP↓
Provider ID: N/A
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

DRISCOLL, SUSAN, NP
Provider ID: N/A
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-OCT-23

Dwyer, Erin, NP
Provider ID: N/A
3444 KEARNY VILLA RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-FEB-24

Dwyer, Erin, NP↓
Provider ID: N/A
3444 KEARNY VILLA RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

Dwyer, Erin, NP↑
Provider ID: N/A
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

Dwyer, Erin, NP
Provider ID: N/A
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

Erickson, Lisa, NP↑
Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

Erickson, Lisa, NP↑
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

Feizi, Sedi, NP↑
Provider ID: N/A
995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

Ferolie, Pam, NP
Provider ID: N/A
375 CAMINO DE LA REINA STE C
SAN DIEGO, CA 92108
Effective as of 01-JAN-23

Filippello, Lauren, NPF
Provider ID: N/A
3863 CLAIREMONT DR
SAN DIEGO, CA 92117
Teleservice
Effective as of 01-OCT-23

Giorgi, Ashley, NP
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

Giorgi, Ashley, NP
Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24
C1. 網絡內提供者清單

專科護理醫師

GOMEZ, LESLIE, NP
Provider ID: N/A
怏 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP
Provider ID: N/A
怏 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GOMEZ, LESLIE, NP
Provider ID: N/A
怏 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GONZALEZ, LISA, NP
Provider ID: N/A
怏 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

GORDON, DANIELLE, NP†
Provider ID: N/A
怏 292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

GROSS, KIMBERLY, NP†
Provider ID: N/A
怏 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

GROSS, KIMBERLY, NP†
Provider ID: N/A
怏 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

HA, THU, NP
Provider ID: N/A
怏 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

HALE, EMILY, NPF
Provider ID: N/A
怏 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-MAY-23

HARVEY, DELFINA, NP
Provider ID: N/A
怏 3490 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-JUL-23

HILL, GENIELYN, NP
Provider ID: N/A
怏 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Effective as of 01-MAY-23

HILLIARD, THESALONICA, NP
Provider ID: N/A
怏 10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

HOOPER, BONNIE, NP†
Provider ID: N/A
怏 9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

HOOPER, BONNIE, NP†
Provider ID: N/A
怏 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HORNFELD, COURTNEY, NP
Provider ID: N/A
怏 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

INSTONE, SUSAN, NP
Provider ID: N/A
怏 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Effective as of 01-SEP-22

INSTONE, SUSAN, NP
Provider ID: N/A
怏 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

JENKINS, ERIN, NP
Provider ID: N/A
怏 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENKINS, ERIN, NP
Provider ID: N/A
砼 4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

JENSEN, ADRIENNE, NP
Provider ID: N/A
砼 4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

JENSEN, ADRIENNE, NP
Provider ID: N/A
砼 350 DICKINSON ST
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<th>Address</th>
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<th>Effective As Of</th>
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<td><strong>KAHL, NICHOLAS, NP</strong></td>
<td>12843 EL CAMINO REAL STE 203</td>
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<td><strong>KI, TRISH, NP</strong></td>
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<td><strong>Lee, Mindy, NP</strong></td>
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<td><strong>Manzano, Eunice, NP</strong></td>
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<td><strong>Manzano, Eunice, NP</strong></td>
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<td><strong>Marosok, Michelle, NP</strong></td>
<td>16918 DOVE CANYON RD STE 103</td>
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<td><strong>Marosok, Michelle, NP</strong></td>
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<td><strong>Martinez, Carolyn, NP</strong></td>
<td>1016 OUTER RD</td>
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<td>01-AUG-22</td>
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<td><strong>Mayoyo, Marilynn, NP</strong></td>
<td>3131 BERGER AVE STE 200</td>
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<td><strong>Mcclain, Megan, NP</strong></td>
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<td>01-AUG-22</td>
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<td><strong>Mcgilloway, Melanie, NP</strong></td>
<td>3444 KEARNY VILLA RD STE 202</td>
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<td><strong>Mcgowan, Glaiza Ann, NP</strong></td>
<td>4168 FRONT ST</td>
<td>SAN DIEGO, CA 92103</td>
<td>01-DEC-23</td>
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<td><strong>Mcgowan, Glaiza Ann, NP</strong></td>
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C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MEDILLO, LOVELLA, NP
Provider ID: N/A
4033 3RD AVE STE 200
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-22

MEDINA, RUBELETA, NP
Provider ID: N/A
9995 CARMEL MOUNTAIN RD STE B1011
SAN DIEGO, CA 92129
Effective as of 01-FEB-23

MELTZER, VIRGINIA, NP‡
Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-21

MEYER, ISAAC, NP
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

MEYER, ISAAC, NP
Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

MICK, SHARON, NP
Provider ID: N/A
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-MAY-23

MOONEY, PATRICIA, NP‡
Provider ID: N/A
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-24

MULVEY, CAOILFHIONN, NP‡
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

MWAURA, WAIRIMU, NP‡
Provider ID: N/A
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JUN-21

NGO-BIGGE, ANGELA, NP
Provider ID: N/A
7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-JUN-23

NOCEDA, ANA, NP‡
Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-SEP-22

NOCEDA, ANA, NP‡
Provider ID: N/A
4305 UNIVERSITY AVE STE 150

Effective as of 01-APR-23

NAGATA, CERAH, NP
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NETZEL, JENNIFER, NP‡
Provider ID: N/A
9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP‡
Provider ID: N/A
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP‡
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

NGO-BIGGE, ANGELA, NP
Provider ID: N/A
7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-JUN-23

NOCEDA, ANA, NP‡
Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-SEP-22

NOCEDA, ANA, NP‡
Provider ID: N/A
4305 UNIVERSITY AVE STE 150

Effective as of 01-APR-23

NAGATA, CERAH, NP
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

NETZEL, JENNIFER, NP‡
Provider ID: N/A
9333 GENESEE AVE
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP‡
Provider ID: N/A
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Effective as of 01-AUG-22

NETZEL, JENNIFER, NP‡
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-AUG-22

NGO-BIGGE, ANGELA, NP
Provider ID: N/A
7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-JUN-23

NOCEDA, ANA, NP‡
Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-SEP-22

NOCEDA, ANA, NP‡
Provider ID: N/A
4305 UNIVERSITY AVE STE 150

Effective as of 01-APR-23

NAGATA, CERAH, NP
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24
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</tr>
<tr>
<td>POVOLI, LAUREN, NPF</td>
<td></td>
<td>3900 5TH AVE STE 110</td>
<td>01-JUN-22</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>SAN DIEGO, CA 92103</td>
<td></td>
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</tr>
</tbody>
</table>

Your PCP's provider network may have some mental health service providers. Please see the list below. You can contact them directly. Please note that certain services may require authorization from the mental health service provider before they can be covered. If you wish to access the mental health service provider list online, please visit blueshieldca.com/fad.
<table>
<thead>
<tr>
<th>Provider ID</th>
<th>Address</th>
<th>Effective Date</th>
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<tr>
<td>N/A</td>
<td>350 DICKINSON ST, SAN DIEGO, CA 92103</td>
<td>01-NOV-22</td>
</tr>
<tr>
<td>N/A</td>
<td>4510 EXECUTIVE DR, SAN DIEGO, CA 92121</td>
<td>01-APR-23</td>
</tr>
<tr>
<td>N/A</td>
<td>4510 EXECUTIVE DR STE 325, SAN DIEGO, CA 92121</td>
<td>01-APR-23</td>
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<tr>
<td>N/A</td>
<td>6655 ALVARADO RD, SAN DIEGO, CA 92120</td>
<td>01-FEB-24</td>
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<tr>
<td>N/A</td>
<td>4060 FAIRMOUNT AVE, SAN DIEGO, CA 92105</td>
<td>01-JUL-21</td>
</tr>
<tr>
<td>N/A</td>
<td>4171 FAIRMOUNT AVE, SAN DIEGO, CA 92105</td>
<td>01-JUL-21</td>
</tr>
<tr>
<td>N/A</td>
<td>200 W ARBOR DR, SAN DIEGO, CA 92103</td>
<td>01-AUG-22</td>
</tr>
<tr>
<td>N/A</td>
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<td>01-AUG-22</td>
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<tr>
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<td>01-AUG-22</td>
</tr>
<tr>
<td>N/A</td>
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<td>01-AUG-22</td>
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<tr>
<td>N/A</td>
<td>995 GATEWAY CENTER</td>
<td>01-AUG-22</td>
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*Provider ID: N/A, Effective as of 01-DEC-21*

**Notes:**
- Effective as of 01-NOV-22
- Effective as of 01-APR-23
- Effective as of 01-FEB-24
- Effective as of 01-JUL-21
- Effective as of 01-AUG-22
- Effective as of 01-DEC-21
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<th>Effective Date</th>
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<td>WAY STE 202</td>
<td>SAN DIEGO, CA 92102</td>
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<tr>
<td>SANTANGELO, JOANNE, NP</td>
<td>6973 LINDA VISTA RD</td>
<td>SAN DIEGO, CA 92111</td>
<td>Effective as of 01-SEP-22</td>
</tr>
<tr>
<td>SANTANGELO, JOANNE, NP</td>
<td>7011 LINDA VISTA RD</td>
<td>SAN DIEGO, CA 92111</td>
<td>Effective as of 01-SEP-22</td>
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<tr>
<td>SATTERWHITE, MAURINE, NP</td>
<td>6973 LINDA VISTA RD</td>
<td>SAN DIEGO, CA 92111</td>
<td>Effective as of 01-SEP-22</td>
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<td>SATTERWHITE, MAURINE, NP</td>
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<td>SAN DIEGO, CA 92111</td>
<td>Effective as of 01-SEP-22</td>
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<tr>
<td>SCOTT, KELLY, NP</td>
<td>2630 1ST AVE</td>
<td>SAN DIEGO, CA 92103</td>
<td>Effective as of 01-JUL-22</td>
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<tr>
<td>SEARS-WILEY, ELIZABETH, NP²</td>
<td>350 DICKINSON ST</td>
<td>SAN DIEGO, CA 92103</td>
<td>Effective as of 01-FEB-21</td>
</tr>
<tr>
<td>SHARMA, RAKHI, NP</td>
<td>16918 DOVE CANYON RD</td>
<td>STE 100</td>
<td>Effective as of 01-JUL-21</td>
</tr>
<tr>
<td>SIETSMA, ALEXANDRA, NP</td>
<td>4305 UNIVERSITY AVE STE 150</td>
<td>SAN DIEGO, CA 92105</td>
<td>Effective as of 01-JUL-22</td>
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<tr>
<td>SMITH, JENNIFER, NP²</td>
<td>4510 EXECUTIVE DR</td>
<td>SAN DIEGO, CA 92121</td>
<td>Effective as of 01-AUG-22</td>
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<tr>
<td>SMITH, JENNIFER, NP²</td>
<td>4520 EXECUTIVE DR</td>
<td>SAN DIEGO, CA 92121</td>
<td>Effective as of 01-AUG-22</td>
</tr>
<tr>
<td>SNYDER, KIRSTIN, NP</td>
<td>350 DICKINSON ST</td>
<td>SAN DIEGO, CA 92103</td>
<td>Effective as of 01-APR-23</td>
</tr>
<tr>
<td>SNYDER, KIRSTIN, NP</td>
<td>350 DICKINSON ST</td>
<td>SAN DIEGO, CA 92103</td>
<td>Effective as of 01-APR-23</td>
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<tr>
<td>SOLOMON, AMANDA, NP</td>
<td>350 DICKINSON ST</td>
<td>SAN DIEGO, CA 92103</td>
<td>Effective as of 01-JUN-23</td>
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<tr>
<td>SOLOMON, AMANDA, NP</td>
<td>350 DICKINSON ST</td>
<td>SAN DIEGO, CA 92103</td>
<td>Effective as of 01-JUN-23</td>
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<tr>
<td>SPAULDING, ENJOLI, NP</td>
<td>8010 FROST ST STE 510</td>
<td>SAN DIEGO, CA 92123</td>
<td>Effective as of 01-AUG-23</td>
</tr>
<tr>
<td>SPAULDING, ENJOLI, NP</td>
<td>6402 EL CAJON BLVD STE 100</td>
<td>SAN DIEGO, CA 92115</td>
<td>Effective as of 01-MAY-23</td>
</tr>
<tr>
<td>STAHL, STEPHANIE, NP²</td>
<td>200 W ARBOR DR</td>
<td>SAN DIEGO, CA 92103</td>
<td>Effective as of 01-DEC-21</td>
</tr>
<tr>
<td>STEFFENSMEIER, CHRISTA, NP</td>
<td>3900 5TH AVE STE 110</td>
<td>SAN DIEGO, CA 92103</td>
<td>Effective as of 01-APR-24</td>
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<tr>
<td>SUHIR, ERIN, NP</td>
<td>4157 FAIRMOUNT AVE</td>
<td>SAN DIEGO, CA 92105</td>
<td>Effective as of 01-MAR-24</td>
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<tr>
<td>SWEENEY, ZSA ZSA, NP</td>
<td>4060 FAIRMOUNT AVE</td>
<td>SAN DIEGO, CA 92105</td>
<td>Effective as of 01-JUL-21</td>
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<tr>
<td>TEJADA BRAS, SANDY, NP</td>
<td>16918 DOVE CANYON RD</td>
<td>STE 100</td>
<td>Effective as of 01-JUL-21</td>
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</table>
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
2929 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

TILLEY, MONICA, NPF
Provider ID: N/A
12843 EL CAMINO REAL STE 203
SAN DIEGO, CA 92130
Effective as of 01-DEC-21

TOMICICH, STEPHANIE, NP
Provider ID: N/A
11770 BERNARDO PLAZA CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-FEB-24

TOMICICH, STEPHANIE, NP
Provider ID: N/A
3444 KEARNY VILLA RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

TOMICICH, STEPHANIE, NP
Provider ID: N/A
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

TOPIK, AMANDA, NP
Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

WIETZKE, MATTHEW, NP
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WIETZKE, MATTHEW, NP
Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92121
Effective as of 01-DEC-22

WILLEY, MARTI, NP³
Provider ID: N/A
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-JAN-24

WILLIAMS, BREAHNA, NP
Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-JAN-24

WILLIAMS, BREAHNA, NP
Provider ID: N/A
4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Effective as of 01-DEC-22

WONG, MAYBELLE, NP
Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92121

609
WONG, MAYBELLE, NP
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

WOO, ANDY, NP
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YARTSEVA, YULIYA, NP
Provider ID: N/A
3737 MORAGA AVE STE B103
SAN DIEGO, CA 92117
Effective as of 01-JAN-21

YEO, ALEXANDRIA, NP
Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CERTIFIED REGISTERED NURSE ANESTHETIST

AMADOR, LINDSAY, CRNA†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CALABRIA, MEGAN, CRNA
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

CANTRELL, SARAH, CRNA
Provider ID: N/A
200 W ARBOR DR

SAN DIEGO, CA 92103
Effective as of 01-DEC-23

COLE, JASON, CRNA†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

DOLLAND, STEVEN, CRNA†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

DULAY, JOTI, CRNA
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

EVANS, CATHERINE, CRNA
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

FIEDLER, DEREK, CRNA
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GONZALEZ, LISA, CRNA
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

GRIFFIN, SETH, CRNA
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

JOHNSTON, RACHEL, CRNA
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

POLIKOWSKI, SAMANTHA, CRNA†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

POLLOM, JESSICA, CRNA†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

RAMIREZ, NICOLE, CRNA†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ROADMAN, KEENE, CRNA
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SACKS, BRENT, CRNA†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-21

SNODGRASS, JULIE, CRNA†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

VINCENT, BERLIN, CRNA†
Provider ID: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
专科護理醫師

CHOI, NATHALIE, CRNM
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

EKHOLM, JANNA, CRNM†
Provider ID: N/A
4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-AUG-22

ELY-KONOSKE, RACHEL, CRNM
Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

ELY-KONOSKE, RACHEL, CRNM
Provider ID: N/A
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-DEC-23

GUNThER, HOPE, CRNM†
Provider ID: N/A
4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

MAST, ASHLEY, CRNM
Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

NATHAN, CARLY, CRNM
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

NATHAN, CARLY, CRNM
Provider ID: N/A
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Effective as of 01-AUG-22

PERDION, KAREN, CRNM†
Provider ID: N/A
4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

RAY, BROOKE, CRNM†
Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

STRAUSS, JOANNA E, CRNM
Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-MAY-21

TAYLOR, INGE, CRNM†
Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

VU HILL, ERICA, NP†
Provider ID: N/A
4290 POLK AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUL-22

CHIROPRACTOR
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<th>Address</th>
<th>City, State, Zip</th>
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<tr>
<td>ASSADIAN, MEHRAK, DC</td>
<td>N/A</td>
<td>950 S EUCLID AVE</td>
<td>SAN DIEGO, CA 92114</td>
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<td>BEATTY, ZACHARY, DC</td>
<td>N/A</td>
<td>1501 IMPERIAL AVE</td>
<td>SAN DIEGO, CA 92101</td>
<td>01-JUL-22</td>
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<td>CABALLERO, JAMES, DC</td>
<td>N/A</td>
<td>9995 CARMEL MOUNTAIN RD STE B10 AND B11</td>
<td>SAN DIEGO, CA 92129</td>
<td>01-NOV-23</td>
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<tr>
<td>CABALLERO, JAMES, DC</td>
<td>N/A</td>
<td>10737 CAMINO RUIZ STE 235</td>
<td>SAN DIEGO, CA 92126</td>
<td>01-NOV-23</td>
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<tr>
<td>CASTRO, DAVID, DC</td>
<td>N/A</td>
<td>1016 OUTER RD</td>
<td>SAN DIEGO, CA 92154</td>
<td>01-AUG-22</td>
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<td>DORADO, SUE, DC</td>
<td>N/A</td>
<td>4060 FAIRMOUNT AVE</td>
<td>SAN DIEGO, CA 92105</td>
<td>01-OCT-23</td>
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<tr>
<td>GILIBERTO, JOSEPH, DC†</td>
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<td>10737 CAMINO RUIZ STE 235</td>
<td>SAN DIEGO, CA 92126</td>
<td>01-AUG-22</td>
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<tr>
<td>GILIBERTO, JOSEPH, DC†</td>
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<td>01-AUG-22</td>
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<tr>
<td>HALEY, STEVEN, DC</td>
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<td>HALEY, STEVEN, DC</td>
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<td>SAN DIEGO, CA 92105</td>
<td>Teleservice</td>
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<tr>
<td>LE, BRANDON, DC</td>
<td>N/A</td>
<td>4290 POLK AVE</td>
<td>SAN DIEGO, CA 92105</td>
<td>01-JUL-22</td>
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<tr>
<td>LE, BRANDON, DC</td>
<td>N/A</td>
<td>6973 LINDA VISTA RD</td>
<td>SAN DIEGO, CA 92111</td>
<td>01-NOV-23</td>
</tr>
<tr>
<td>LE, BRANDON, DC</td>
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<td>2630 1ST AVE</td>
<td>SAN DIEGO, CA 92103</td>
<td>01-JUL-22</td>
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<tr>
<td>LOVERN, JENNIFER, DC</td>
<td>N/A</td>
<td>4419 EUCLID AVE STE 105</td>
<td>SAN DIEGO, CA 92115</td>
<td>01-SEP-22</td>
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<tr>
<td>LOVERN, JENNIFER, DC</td>
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<td>4419 EUCLID AVE STE 105</td>
<td>SAN DIEGO, CA 92115</td>
<td>01-SEP-22</td>
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<tr>
<td>ROSENBERG, ERIK, DC</td>
<td>N/A</td>
<td>7612 LINDA VISTA RD STE 109</td>
<td>SAN DIEGO, CA 92111</td>
<td>01-DEC-20</td>
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<tr>
<td>SU, VENNES, DC</td>
<td>N/A</td>
<td>10737 CAMINO RUIZ STE 235</td>
<td>SAN DIEGO, CA 92126</td>
<td>01-OCT-23</td>
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**DERMATOLOGY**

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<th>Effective as of</th>
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<tr>
<td>AHLUWALIA, JUSLEEN, MD</td>
<td>N/A</td>
<td>9878 HIBERT ST STE 100</td>
<td>SAN DIEGO, CA 92131</td>
<td>01-DEC-20</td>
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<tr>
<td>ANGRA, KUNAL, MD†</td>
<td>N/A</td>
<td>9339 GENESEE AVE STE 350</td>
<td>SAN DIEGO, CA 92121</td>
<td>Teleservice</td>
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<tr>
<td>ANGRA, KUNAL, MD†</td>
<td>N/A</td>
<td>9339 GENESEE AVE STE 350</td>
<td>SAN DIEGO, CA 92121</td>
<td>Teleservice</td>
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<tr>
<td>ANGRA, KUNAL, MD†</td>
<td>N/A</td>
<td>4060 4TH AVE STE 415</td>
<td>SAN DIEGO, CA 92103</td>
<td>Teleservice</td>
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</table>
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-21

ANGRA, KUNAL, MD
Provider ID: N/A
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-24

BOEN, MONICA, MD
Provider ID: N/A
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JUN-18

BOEN, MONICA, MD
Provider ID: N/A
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

BOEN, MONICA, MD
Provider ID: N/A
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JUN-22

BOEN, MONICA, MD
Provider ID: N/A
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JAN-22

BOEN, MONICA, MD
Provider ID: N/A
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BRADSHAW, MICHAEL, MD
Provider ID: N/A
9878 HIBERT ST STE 100
SAN DIEGO, CA 92131

BROUHA, BROOK, MD
Provider ID: N/A
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BROUHA, BROOK, MD
Provider ID: N/A
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

BROUHA, BROOK, MD
Provider ID: N/A
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

CALAME, ANTOANELLA, MD
Provider ID: N/A
6605 NANCY RIDGE DR
SAN DIEGO, CA 92121

CHEN, BRYAN, MD
Provider ID: N/A
9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JUL-16

CHEN, BRYAN, MD
Provider ID: N/A
9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JUL-16

DELA ROSA, KRISTINA, MD
Provider ID: N/A
9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-AUG-17

DELA ROSA, KRISTINA, MD
Provider ID: N/A
9878 HIBERT ST STE 100
SAN DIEGO, CA 92131
Effective as of 01-JAN-18

ERICKSON, CHRISTOPHER, MD
Provider ID: N/A
6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-22

GERSTENFELD, ERIC, MD
Provider ID: N/A
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-JAN-21

GLADSJO, JULIE, MD
Provider ID: N/A
 Saúde 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-SEP-22

HAMMAN, MICHAEL, MD†
Provider ID: N/A
 Saúde 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-FEB-23

GRUSHCHAK, SOLOMIYA, MD
Provider ID: N/A
 Saúde 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-JAN-21

HAMMAN, MICHAEL, MD†
Provider ID: N/A
 Saúde 9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

HAMMAN, MICHAEL, MD†
Provider ID: N/A
 Saúde 9339 GENESEE AVE STE 350A
SAN DIEGO, CA 92121
Effective as of 01-JUN-17

HAMMAN, MICHAEL, MD†
Provider ID: N/A
 Saúde 9339 GENESEE AVE STE 350A
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

HAMMAN, MICHAEL, MD†
Provider ID: N/A
 Saúde 9339 GENESEE AVE STE 350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

HAN, AMY, MD
Provider ID: N/A
 Saúde 6386 ALVARADO CT STE 209
SAN DIEGO, CA 92120
Effective as of 01-FEB-22

HEMPERLY, STEPHEN, DO†
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 Saúde 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

HEMPERLY, STEPHEN, DO†
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 Saúde 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

KEEL, DOUGLAS, DO
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 Saúde 8899 UNIVERSITY CENTER LN STE 150
SAN DIEGO, CA 92122
Effective as of 01-JAN-21

LEE, MICHAEL, MD
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 Saúde 3965 5TH AVE STE 200
SAN DIEGO, CA 92103

614
Effective as of 01-SEPT-22

LUPTON, JASON, MD
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12395 EL CAMINO REAL STE 207
SAN DIEGO, CA 92130
Effective as of 01-MAR-16

LYFORD, WILLIS, MD
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6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Effective as of 01-MAY-23

MAFONG, ERICK, MD
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4060 4TH AVE STE 209
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

NAHM, WALTER, MD
Provider ID: N/A
7695 CARDINAL CT STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-14

NAHM, WALTER, MD
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7695 CARDINAL CT STE 200
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

NAHM, WALTER, MD
Provider ID: N/A
7695 CARDINAL CT STE 200
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PELLE, MICHELINE, MD†
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3965 5TH AVE STE 200
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REED, KELLY, DO†
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4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

REED, KELLY, DO†
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4060 4TH AVE STE 415
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Effective as of 01-MAR-20

RILEY, JESSICA, DO†
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9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RILEY, JESSICA, DO†
Provider ID: N/A
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RILEY, JESSICA, DO†
Provider ID: N/A
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

RILEY, JESSICA, DO†
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4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

RILEY, JESSICA, DO†
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SIRICHOTIRATANA, MELISSA, MD†
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4765 CARMEL MOUNTAIN RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-JAN-23

SCHMIEDECKE, RUDY, MD
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6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-JUL-23

SHAHAN, FRED, MD
Provider ID: N/A
6367 ALVARADO CT STE 107
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

SHAHAN, FRED, MD
Provider ID: N/A
6367 ALVARADO CT STE 107
SAN DIEGO, CA 92120
Effective as of 01-JAN-14

SHIELL, RONALD, MD†
Provider ID: N/A
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SHIELL, RONALD, MD†
Provider ID: N/A
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SHIELL, RONALD, MD†
Provider ID: N/A
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

SIRICHOTIRATANA, MELISSA, MD†
Provider ID: N/A
4765 CARMEL MOUNTAIN RD STE 201
SAN DIEGO, CA 92130
Effective as of 01-JAN-23
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<td>SOON, SEAVER, MD</td>
<td>N/A</td>
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<td>STEIN, ALEXANDER, MD</td>
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<td>ZHU, NAN, MD</td>
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<td>01-JUL-19</td>
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*Note: The list includes specialists in various fields such as dermatology, emergency medicine, and more.*
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<td>CASTELLANO, TIFFANY, MD</td>
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<td>01-AUG-20</td>
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<td>GUEFEN, URI, MD</td>
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<td>HARE, MARC, MD</td>
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<td>HOGUE, BRENNA, MD</td>
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<td>JURKOWSKI, LEONARD, MD</td>
<td>N/A</td>
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<td>KUTZ, CRAIG, MD</td>
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<td>LIOTTA, BENJAMIN, MD</td>
<td>N/A</td>
<td>16950 VIA TAZON SAN DIEGO, CA 92127</td>
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**ENDOCRINOLOGY**

**METABOLISM DIABETES**

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<tr>
<td>EKANAYAKE, PREETHIKA, MD†</td>
<td>N/A</td>
<td>200 W ARBOR DR SAN DIEGO, CA 92103</td>
<td>01-SEP-21</td>
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<tr>
<td>EKANAYAKE, PREETHIKA, MD†</td>
<td>N/A</td>
<td>4168 FRONT ST SAN DIEGO, CA 92103</td>
<td>01-SEP-21</td>
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<tr>
<td>FIRST, BRIAN, MD†</td>
<td>N/A</td>
<td>4282 GENESEE AVE STE 103 SAN DIEGO, CA 92117</td>
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<td>GUERIN, CHRIS, MD†</td>
<td>N/A</td>
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<td>HOSEIN, NADEEN, MD</td>
<td>N/A</td>
<td>4077 5TH AVE STE 35 SAN DIEGO, CA 92103</td>
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<td>IYENGAR, RAVI, MD</td>
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<td>4168 FRONT ST SAN DIEGO, CA 92103</td>
<td>01-APR-23</td>
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<td>IYENGAR, RAVI, MD</td>
<td>N/A</td>
<td>4168 FRONT ST SAN DIEGO, CA 92103</td>
<td>01-APR-23</td>
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200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

NAGELBERG, JODI, MD†
Provider ID: N/A
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
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NAGELBERG, JODI, MD†
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†
Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

NAGELBERG, JODI, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

SHAH, NANDI, MD
Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

SHAH, NANDI, MD
Provider ID: N/A
1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
Effective as of 01-JUL-20

TANTISIRA, LALITA, MD†
Provider ID: N/A
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

ENDOCRINOLOGY
REPRODUCTIVE

DANESHMAND, SAID, MD
Provider ID: N/A
11515 EL CAMINO REAL STE 100
SAN DIEGO, CA 92130
Effective as of 01-MAY-23

FOYOUZI-YOUSEFI, NASTARAN, MD
Provider ID: N/A
11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-DEC-20

HILL, LINDA, MD†
Provider ID: N/A

FRIEDMAN, BROOKE, MD†
Provider ID: N/A
11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BERNADETT, ALEX, MD†
Provider ID: N/A
10505 SORRENTO VALLEY RD STE 200
SAN DIEGO, CA 92121
Effective as of 01-FEB-23

BERNADETT, ALEX, MD†
Provider ID: N/A
6699 ALVARADO RD STE 2100
SAN DIEGO, CA 92120
Effective as of 01-FEB-23

CAMPBELL, BRIANNA, MD
Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

DENYSIAK, JACQUELINE, MD†
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3969 4TH AVE STE 203
SAN DIEGO, CA 92103
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Effective as of 01-DEC-20

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL, MD†
Provider ID: N/A
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Effective as of 01-SEP-23

BERNADETT, ALEX, MD†
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6699 ALVARADO RD STE 2100
SAN DIEGO, CA 92120
Effective as of 01-FEB-23

CAMPBELL, BRIANNA, MD
Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

DENYSIAK, JACQUELINE, MD†
Provider ID: N/A
3969 4TH AVE STE 203
SAN DIEGO, CA 92103
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Effective as of 01-DEC-20

HILL, LINDA, MD†
Provider ID: N/A
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6973 LINDA VISTA RD
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JOLICOEUR, MEGAN, DO
Provider ID: N/A
9333 GENESEE AVE
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JOLICOEUR, MEGAN, DO
Provider ID: N/A
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JOLICOEUR, MEGAN, DO
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8899 UNIVERSITY CENTER
LN STE 350
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KUROSAKA, MOMO, MD
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200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

KUROSAKA, MOMO, MD
Provider ID: N/A
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-FEB-24

LYNCH, SHAUNA, DO
Provider ID: N/A
1075 CAMINO DEL RIO S
SAN DIEGO, CA 92108
Effective as of 01-SEP-22

MARSTON, JACQUELINE, DO
Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

PERESS, LILIA, MD
Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-FEB-24

PERESS, LILIA, MD
Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

RODRIGUEZ, NATALIE, MD
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1685 HOLLISTER ST
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SHEKER-DICKSON, KIMBERLY, DO
Provider ID: N/A
1628 PALM AVE
SAN DIEGO, CA 92154
Effective as of 01-FEB-24

SUMMERS-DAY, COURTNEY, MD
Provider ID: N/A
1016 OUTER RD
SAN DIEGO, CA 92154
Effective as of 01-JUL-22

FAMILY PRACTICE
GERIATRIC MEDICINE

MILLER, SCOTT, MD
Provider ID: N/A
9878 CARMEL MOUNTAIN RD STE B
SAN DIEGO, CA 92129
Effective as of 01-JAN-21

FAMILY PRACTICE
SPORTS MEDICINE

UDOWENKO, MARINA, DO
Provider ID: N/A
375 CAMINO DE LA REINA STE C
SAN DIEGO, CA 92108
Effective as of 01-JUN-23

CUBAS, IVAN, MD
Provider ID: N/A
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-DEC-14

CUBAS, IVAN, MD
Provider ID: N/A
8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-SEP-22

CHANDRADAS, SAJIV, MD
Provider ID: N/A
4060 4TH AVE STE 240
SAN DIEGO, CA 92103
Effective as of 01-JUL-17

CUBAS, IVAN, MD
Provider ID: N/A
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-DEC-14

FAMILY PRACTICE
GASTROENTEROLOGY

CHANDRADAS, SAJIV, MD
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4060 4TH AVE STE 240
SAN DIEGO, CA 92103
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CUBAS, IVAN, MD
Provider ID: N/A
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-DEC-14

CUBAS, IVAN, MD
Provider ID: N/A
8899 UNIVERSITY CENTER
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SAN DIEGO, CA 92122
Effective as of 01-SEP-22

CUBAS, IVAN, MD
Provider ID: N/A
1685 HOLLISTER ST
SAN DIEGO, CA 92154
Effective as of 01-JUL-17
| Provider ID: N/A |
| 292 EUCLID AVE STE 115 |
| SAN DIEGO, CA 92114 |
| Effective as of 01-MAR-15 |
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| 292 EUCLID AVE STE 115 |
| SAN DIEGO, CA 92114 |
| Effective as of 01-JAN-21 |
| **CUMMINS, ANDREW, MD** |
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| 4060 4TH AVE STE 240 |
| SAN DIEGO, CA 92103 |
| Effective as of 01-JAN-15 |
| **DESTA, TADESE, MD** |
| Provider ID: N/A |
| 292 EUCLID AVE STE 115 |
| SAN DIEGO, CA 92114 |
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| **DESTA, TADESE, MD** |
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| 292 EUCLID AVE STE 115 |
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| Effective as of 01-JUN-21 |
| **HASAN, AWS, MD** |
| Provider ID: N/A |
| 200 W ARBOR DR |
| SAN DIEGO, CA 92120 |
| Effective as of 01-JUL-22 |
| **HASSANEIN, TAREK, MD** |
| Provider ID: N/A |
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| SAN DIEGO, CA 92120 |
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| **KITAL, ROBERT, MD** |
| Provider ID: N/A |
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| SAN DIEGO, CA 92103 |
| Effective as of 01-AUG-23 |
| **MITTAL, YASH, MD** |
| Provider ID: N/A |
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| **NOVO, MEGAN, MD** |
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| 6699 ALVARADO RD STE 2306 |
| SAN DIEGO, CA 92120 |
| Effective as of 01-JAN-14 |

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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<td>SAN DIEGO, CA</td>
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<td>N/A</td>
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<td>YOUSSEF, FADY, MD</td>
<td>N/A</td>
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<td>RECALDE, FRANCISCO, MD</td>
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<td>RECALDE, FRANCISCO, MD</td>
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<td>JONES, MARILYN, MD</td>
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<td>FOYOUZI-YOUSEFI, NASTARAN, MD</td>
<td>N/A</td>
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C1. 網絡內提供者清單

網絡內提供者清單

**Gynecologic Oncology**

**BAHADOR, AFSHIN, MD**
Provider ID: N/A
5030 CAMINO DE LA SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-APR-23

**DUGGAN, BRIDGETTE, MD**
Provider ID: N/A
5030 CAMINO DE LA SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-MAY-23

**NYAKUDARIKA, NATSAI, MD**
Provider ID: N/A
5030 CAMINO DE LA SIESTA STE 204
SAN DIEGO, CA 92108
Effective as of 01-JUL-23

**Gynecology**

**WILLIAMS, ALISA, MD**
Provider ID: N/A
5555 RESERVOIR DR STE 307
SAN DIEGO, CA 92120
Effective as of 01-JAN-20

**Hearing Aid Dealer / Supplier**

**ANAYA, MANUEL, MA**
Provider ID: N/A
9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

**ANDERSON, ELAINE, MA**
Provider ID: N/A
6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

**ANDERSON, ELAINE, MA**
Provider ID: N/A
9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

**ANDERSON, ELAINE, MA**
Provider ID: N/A
6367 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-SEP-22

**DANDURAND, JOHN, MA**
Provider ID: N/A
6367 ALVARADO CT
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-SEP-22

**DANDURAND, JOHN, MA**
Provider ID: N/A
9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-22

**DANDURAND, JOHN, MA**
Provider ID: N/A
9340 CLAIREMONT MESA BLVD STE D
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-22

**DANDURAND, JOHN, MA**
Provider ID: N/A
3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

**HEMATOLOGY / ONCOLOGY**

**AHMED, SYED, MD**
Provider ID: N/A
7432 LA MANTANZA
SAN DIEGO, CA 92127
Effective as of 01-FEB-24

**ANDREY, JEFFREY, MD**
Provider ID: N/A
3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

**ANDREY, JEFFREY, MD**
Provider ID: N/A
3965 5TH AVE STE 230
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

**ANAYA, MANUEL, MA**
Provider ID: N/A
9340 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92123
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**BASERI, BABAK, MD**
Provider ID: N/A
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SAN DIEGO, CA 92103
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HOSPICE AND PALLIATIVE MEDICINE

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<td>RUBENZIK, TAMARA, MD†</td>
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624
C1. 網絡內提供者清單
專科護理醫師

**INFECTIONOUS DISEASE**

ALDOUS, JEANNETTE, MD†
Provider ID: N/A
- 950 S EUCLID AVE
  SAN DIEGO, CA 92114
  Effective as of 01-JUL-22

CAPERNA, JOSEPH, MD†
Provider ID: N/A
- 2333 1ST AVE STE 104
  SAN DIEGO, CA 92101
  Effective as of 01-JUL-21

KUPPALLI, KRUTIKA, MD
Provider ID: N/A
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-AUG-23

MARTIN, THOMAS, MD†
Provider ID: N/A
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-MAR-21

MARTIN, THOMAS, MD†
Provider ID: N/A
- 4168 FRONT ST FL 3
  SAN DIEGO, CA 92103
  Effective as of 01-MAR-21

RAMIREZ SANCHEZ, CLAUDIA, MD
Provider ID: N/A
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-JUL-23

**INTERNAL MEDICINE**

AIZIN, VITALI, MD
Provider ID: N/A
- 3802 NATIONAL AVE
  SAN DIEGO, CA 92113*  

Effective as of 01-OCT-23

AL-SALEH, YADANI, MD†
Provider ID: N/A
- 3737 MORAGA AVE STE B103
  SAN DIEGO, CA 92117
  Effective as of 01-MAR-23

BALL, SHELDON, MD
Provider ID: N/A
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
  Effective as of 01-OCT-22

BALL, SHELDON, MD
Provider ID: N/A
- 7011 LINDA VISTA RD
  SAN DIEGO, CA 92111
  Effective as of 01-OCT-22

BRAZEL, DANIELLE, MD
Provider ID: N/A
- 6655 ALVARADO RD
  SAN DIEGO, CA 92120
  Effective as of 01-JAN-24

BRAZEL, DANIELLE, MD
Provider ID: N/A
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-JAN-24

CHAU, JOHN, MD†
Provider ID: N/A
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
  Effective as of 01-MAY-23

CHONGKRAIRATANAKUL, TEPSIRI, MD†
Provider ID: N/A
- 8010 FROST ST STE 510
  SAN DIEGO, CA 92123
  Effective as of 01-MAY-24

CHUNG, KIYON, MD†
Provider ID: N/A
- 4060 4TH AVE STE 650
  SAN DIEGO, CA 92103
  Effective as of 01-NOV-12

CSAPOCZI, PETER, MD
Provider ID: N/A
- 950 S EUCLID AVE
  SAN DIEGO, CA 92114
  Teleservice
  Effective as of 01-JAN-21

DASHI, ARBEN, MD†
Provider ID: N/A
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-AUG-22

DAVIS, JASON, MD†
Provider ID: N/A
- 4060 4TH AVE STE 220
  SAN DIEGO, CA 92103
  Effective as of 01-JAN-24

DAVIS, JASON, MD†
Provider ID: N/A
- 8010 FROST ST STE 510
  SAN DIEGO, CA 92123
  Effective as of 01-NOV-23

FARAVARDEH, ARMAN, MD†
Provider ID: N/A
- 8010 FROST ST STE 510
  SAN DIEGO, CA 92123
  Effective as of 01-NOV-16

GADIYARAM, VARUNA, MD
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<td>N/A</td>
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<td>4303 LA JOLLA VILLAGE DR STE 2110, SAN DIEGO, CA 92122</td>
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<td>N/A</td>
<td>JAIN, SUPRABHA, MD</td>
<td>6496 WEATHERS PL STE</td>
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<td>KATSNELSON, MARCELLA, DO</td>
<td>3633 CAMINO DEL RIO S STE 300, SAN DIEGO, CA 92108</td>
<td>01-MAR-21</td>
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<td>N/A</td>
<td>KOOKOOTSEDES, GAYLE, MDُ</td>
<td>950 S EUCLID AVE, SAN DIEGO, CA 92114</td>
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<td>N/A</td>
<td>LIU, ANDREW, MD</td>
<td>6402 EL CAJON BLVD STE 100 &amp; 102, SAN DIEGO, CA 92115</td>
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<td>LUND, GUY, MDُ</td>
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<td>6402 EL CAJON BLVD STE 100 &amp; 102, SAN DIEGO, CA 92115</td>
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C1. Network Provider List

SAN DIEGO, CA 92115*
Teleservice
Effective as of 01-SEP-22

NOKES, BRANDON, MD†
Provider ID: N/A
𝐆 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PITT, WILLIAM, MD†
Provider ID: N/A
𝐆 6386 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-JAN-23

SONG, ALEXANDER, MD
Provider ID: N/A
𝐆 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

TANTISIRA, LALITA, MD†
Provider ID: N/A
𝐆 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

TANTISIRA, LALITA, MD†
Provider ID: N/A
𝐆 4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

TOPPEN, WILLIAM, MD†
Provider ID: N/A
𝐆 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

TRIVEDI, MEHUL, MD
Provider ID: N/A
𝐆 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

TRIVEDI, MEHUL, MD
Provider ID: N/A
𝐆 6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-JAN-24

YANG, JENNY, MD†
Provider ID: N/A
𝐆 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-21

YANG, JENNY, MD†
Provider ID: N/A
𝐆 4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

INTERNAL MEDICINE
CRITICAL CARE MEDICINE

BOROK, ZEA, MD†
Provider ID: N/A
𝐆 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

BOROK, ZEA, MD†
Provider ID: N/A
𝐆 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

BOROK, ZEA, MD†
Provider ID: N/A
𝐆 4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

INTERVENTIONAL
CARDIOLOGY

CARAMBAS, CLARITA, MD†
Provider ID: N/A
𝐆 9190 MIRA MESA BLVD
SAN DIEGO, CA 92126
Effective as of 01-SEP-22

CHUNG, KIYON, MD†
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

CRUZ RODRIGUEZ, JOSE, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

FRIEDMAN, RICHARD, MD†
Provider ID: N/A
4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

GLASSMAN, JERROLD, MD†
Provider ID: N/A
4060 4TH AVE STE 650
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

GOLAPUDI, RAGHAVA, MD†
Provider ID: N/A
6402 EL CAJON BLVD STE 102
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

GOLAPUDI, RAGHAVA, MD†
Provider ID: N/A
3131 BERGER AVE STE 200
SAN DIEGO, CA 92123
Effective as of 01-MAR-13

GOLAPUDI, RAGHAVA, MD†
Provider ID: N/A
7901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

JOHN, ALAN, MD
Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

MOHAMEDALI, BURHAN, MD†
Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

MULLVAIN, JEFFRY, MD†
Provider ID: N/A
4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

NARAYANAN, MEENA, MD†
Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

NGUYEN, BRYANT, MD†
Provider ID: N/A
4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

NGUYEN, TRI, MD†
Provider ID: N/A
7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Teleservice
Effective as of 01-JAN-21

PITT, WILLIAM, MD†
Provider ID: N/A
6386 ALVARADO CT STE 101
SAN DIEGO, CA 92120
Effective as of 01-SEP-15

RUBIO GARCIA, MANOLO, MD†
Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-MAY-23

RUBIO GARCIA, MANOLO, MD†
Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-DEC-22

RUBIO GARCIA, MANOLO, MD†
Provider ID: N/A
501 WASHINGTON ST STE 512
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

SALAMI, ALI, MD†
Provider ID: N/A
501 WASHINGTON ST STE 512
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

SCLAR, CRAIG, MD
Provider ID: N/A
3880 MURPHY CANYON RD STE 120
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-DEC-23

SCLAR, CRAIG, MD
Provider ID: N/A
3880 MURPHY CANYON RD STE 120
C1. 網絡內提供者清單

專科護理醫師

SCLAR, CRAIG, MD
Provider ID: N/A
7830 CLAIREMONT MESA BLVD STE 100
SAN DIEGO, CA 92111
Effective as of 01-MAR-24

SCOTT, EMILY, MD†
Provider ID: N/A
4060 4TH AVE STE 500
SAN DIEGO, CA 92103
Effective as of 01-APR-23

SHAH, KULIN, MD†
Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-23

SHEREV, DIMITRI, MD†
Provider ID: N/A
6402 EL CAJON BLVD STE 102
SAN DIEGO, CA 92115
Effective as of 01-JAN-24

SUDHAKAR, DEEPTHI, MD†
Provider ID: N/A
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Effective as of 01-APR-23

LICENSED CLINICAL SOCIAL WORKER

ALVAREZ, DIANA, LCSW
Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice

Effective as of 01-APR-21

BASHAM, CLAUDIA, LCSW
Provider ID: N/A
3025 BEYER BLVD STE E101
SAN DIEGO, CA 92154
Teleservice
Effective as of 01-DEC-23

BIGGER, ALAINA, LCSW
Provider ID: N/A
4849 RONSON CT STE 207
SAN DIEGO, CA 92111
Effective as of 01-AUG-23

BROWN, EDEN, LCSW†
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-22

DIAZ, JAENAI, LCSW
Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

DSOUZA, NICOLE, LCSW†
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ESCAMILLA, KARLA, LCSW†
Provider ID: N/A
950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-DEC-21

GONZALEZ, ADRIANA, LCSW
Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

Hamm, Deanna, LCSW
Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

JASSO-RAMIREZ, MARTHA, LCSW
Provider ID: N/A
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

KHAMISA, SORAIYA, LCSW
Provider ID: N/A
4520 EXECUTIVE DR STE A
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

LOWE, LINDSAY, LCSW
Provider ID: N/A
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

RABBAN, DIANA, LCSW
Provider ID: N/A
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Teleservice
Effective as of 01-NOV-22

SACHS, MELISSA, LCSW†
Provider ID: N/A
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Teleservice
### C1. 網絡內提供者清單

**專科護理醫師**

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<th>Address</th>
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**LICENSED PROFESSIONAL CLINICAL COUNSELOR**

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**MARRIAGE FAMILY THERAPIST**

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<td>KUEK, JOHN, MFT</td>
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**PATERNAL AND FETAL MEDICINE**

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<td>01-JAN-24</td>
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<tr>
<td>BERGGREN, ERICA, MD†</td>
<td>N/A</td>
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<tr>
<td>DOWLING, DAVID, MD†</td>
<td>N/A</td>
<td>12264 EL CAMINO REAL STE 204</td>
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<td>EMERUWA, UKACHI, MD</td>
<td>N/A</td>
<td>16950 VIA TAZON</td>
<td>01-JUN-23</td>
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<td>EMERUWA, UKACHI, MD</td>
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<td>200 W ARBOR DR</td>
<td>01-JUN-23</td>
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<td>EMERUWA, UKACHI, MD</td>
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<td>4168 FRONT ST</td>
<td>01-JUN-23</td>
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<td>GOLLIN, YVONNE, MD†</td>
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<td>EISENBERG, STEVEN, DO†</td>
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<tr>
<td>AL-DAHHAN, ZAID, MD</td>
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<td>6402 EL CAJON BLVD STE 100</td>
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<td>AL-DAHHAN, ZAID, MD</td>
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<td>4060 4TH AVE STE 220</td>
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<tr>
<td>AL-DAHHAN, ZAID, MD</td>
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<td>BOISKIN, MARK, MD</td>
<td>Provider ID: N/A</td>
<td>9610 GRANITE RIDGE DR STE B</td>
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<tr>
<td>CALDERON MOLINA, JUAN, MD</td>
<td>Provider ID: N/A</td>
<td>9610 GRANITE RIDGE DR STE B</td>
<td>SAN DIEGO, CA 92123</td>
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<tr>
<td>CHONGKRAIRATANAKUL, TEPSIRI, MD†</td>
<td>Provider ID: N/A</td>
<td>8010 FROST ST STE 510</td>
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<td>DAVIS, JASON, MD†</td>
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<tr>
<td>DAVIS, JASON, MD†</td>
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<tr>
<td>FARAVARDEH, ARMAN, MD</td>
<td>Provider ID: N/A</td>
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<td>HAMMES, JOHN, MD†</td>
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<td>HUSSAIN, SHAHID, MD</td>
<td>Provider ID: N/A</td>
<td>6402 EL CAJON BLVD STE 100</td>
<td>SAN DIEGO, CA 92115</td>
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Your PCP's provider group may have its own network mental health service providers. Please refer to the below list. You can directly contact these providers. Please note, certain services may require prior authorization from the mental health service provider to be covered by Blue Shield.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Effective as of 01-JUL-22

NAMAZY, DAVID, MD†
Provider ID: N/A
6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Effective as of 01-JUL-22

KHAING, KATHY, MD†
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-23

LE, CHARLES, MD†
Provider ID: N/A
4440 EUCLID AVE STE A
SAN DIEGO, CA 92115
Effective as of 01-JUL-21

LE, CHARLES, MD†
Provider ID: N/A
4440 EUCLID AVE
SAN DIEGO, CA 92115
Effective as of 01-SEP-22

LUND, GUY, MD†
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

LUND, GUY, MD†
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

LUND, GUY, MD†
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-16

NAMAZY, DAVID, MD†
Provider ID: N/A
6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Effective as of 01-NOV-16

QUEVEDO, JUAN, MD†
Provider ID: N/A
995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

RAHIMI, SINA, DO†
Provider ID: N/A
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-23

SACAMAY, TAGUMPAY, MD†
Provider ID: N/A
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

SETHI, SUPREET, MD
Provider ID: N/A
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

SHAPIRO, MARK, MD
Provider ID: N/A
9610 GRANITE RIDGE DR STE B
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

STEER, DYLAN, MD†
Provider ID: N/A
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

THOMAS, THEODORE, MD†
Provider ID: N/A
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Effective as of 01-JAN-21
C1. 網絡內提供者清單

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**NEUROLOGY**

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
<table>
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<th>Address</th>
<th>City, State, Zip</th>
<th>Effective As Of</th>
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<td>Khamishon, Boris, MD</td>
<td>6699 Alvarado Rd Ste 2301</td>
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<tr>
<td>Kureshi, Sohaib, MD</td>
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<td>3737 Moraga Ave Ste A5</td>
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<td>Malik, Sudhir, MD</td>
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<td>Malik, Sudhir, MD</td>
<td>4033 3rd Ave Ste 420</td>
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<td>01-OCT-19</td>
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<td>4033 3rd Ave Ste 420</td>
<td>San Diego, CA 92103</td>
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<tr>
<td>Qayoumi, Wali, MD</td>
<td>6655 Alvarado Rd</td>
<td>San Diego, CA 92120</td>
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<tr>
<td>Qayoumi, Wali, MD</td>
<td>6655 Alvarado Rd</td>
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<tr>
<td>Schorr, Emily, MD</td>
<td>4510 Executive Dr Ste 325</td>
<td>San Diego, CA 92121</td>
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<tr>
<td>Schorr, Emily, MD</td>
<td>4510 Executive Dr Ste 325</td>
<td>San Diego, CA 92121</td>
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Your PCP’s health plan may have its own network of mental health providers. Please refer to the below list. You may directly contact these providers. Please note, certain services may require that the mental health provider obtain prior authorization from Blue Shield before the service is covered.

To view the mental health provider list online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

ALEXANDER, SINDU, MD†
Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHOI, ESTHER, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

OBSTETRICS /
GYNECOLOGY

AL-MSHHDANI, AYSER, MD
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

ASLIAN, AZITA, MD†
Provider ID: N/A

950 S EUCLID AVE
SAN DIEGO, CA 92114
Effective as of 01-SEP-22

BLAKE, GARY, MD†
Provider ID: N/A

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

BRAHMBHATT, BHOOMI, MD
Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-23

CARDEÑAS, MICHAEL, MD†
Provider ID: N/A

2918 5TH AVE STE 100
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CARDEÑAS, MICHAEL, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

CHAC, RICK, MD†
Provider ID: N/A

550 WASHINGTON ST STE 331
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

CHUAN, SANDY, MD†
Provider ID: N/A

11425 EL CAMINO REAL
SAN DIEGO, CA 92130
Effective as of 01-FEB-16

CONTRERAS, MICHELLE, MD†
Provider ID: N/A

550 WASHINGTON ST STE 331
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-FEB-22

DAVIS, TRACIE, MD
Provider ID: N/A

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-23

DELCORE, LAURA, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-22

SHARIF TABRIZI, AHMAD, MD
Provider ID: N/A

330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

SHARIF TABRIZI, AHMAD, MD
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

CASTILLO, MARIA, MD†
Provider ID: N/A

7930 FROST ST STE 103
SAN DIEGO, CA 92123
Effective as of 01-FEB-21

636
C1. 網絡內提供者清單

**專科護理醫師**

**DELCORE, LAURA, MD**
Provider ID: N/A
- 4168 FRONT ST
  SAN DIEGO, CA 92103
  Effective as of 01-AUG-22

**DELCORE, LAURA, MD**
Provider ID: N/A
- 3750 CONVOY ST STE 312
  SAN DIEGO, CA 92111
  Effective as of 01-AUG-22

**DELCORE, LAURA, MD**
Provider ID: N/A
- 16950 VIA TAZON
  SAN DIEGO, CA 92127
  Effective as of 01-AUG-22

**DRIEBE, AMY, MD**
Provider ID: N/A
- 6030 VILLAGE WAY
  SAN DIEGO, CA 92130
  Effective as of 01-AUG-22

**DRIEBE, AMY, MD**
Provider ID: N/A
- 16950 VIA TAZON
  SAN DIEGO, CA 92127
  Effective as of 01-AUG-22

**DRIEBE, AMY, MD**
Provider ID: N/A
- 3750 CONVOY ST STE 312
  SAN DIEGO, CA 92111
  Effective as of 01-AUG-22

**DRIEBE, AMY, MD**
Provider ID: N/A
- 330 LEWIS ST

**FOLCH TORRES-AGUIAR, BEATRIZ, MD**
Provider ID: N/A
- 4060 FAIRMOUNT AVE
  SAN DIEGO, CA 92105
  Effective as of 01-JUN-22

**FRUGONI, GINA, MD**
Provider ID: N/A
- 4168 FRONT ST
  SAN DIEGO, CA 92103
  Effective as of 01-JAN-21

**GELLENS, ANDREW, MD**
Provider ID: N/A
- 4060 FAIRMOUNT AVE
  SAN DIEGO, CA 92105
  Effective as of 01-JUN-22

**HARVEY, SCOTT, MD**
Provider ID: N/A
- 4168 FRONT ST
  SAN DIEGO, CA 92103
  Effective as of 01-MAY-21

**HARVEY, SCOTT, MD**
Provider ID: N/A
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-MAY-21

**HUI, KIM, MD**
Provider ID: N/A
- 2918 5TH AVE STE 100
  SAN DIEGO, CA 92103
  Effective as of 01-SEP-15

**JAIME, CINDY, MD**
Provider ID: N/A
- 950 S EUCLID AVE
  SAN DIEGO, CA 92114

**JENKINS, ENCHANTA, MD**
Provider ID: N/A
- 4060 FAIRMOUNT AVE
  SAN DIEGO, CA 92105
  Effective as of 01-JUN-22

**KHAN, ALIYA, MD**
Provider ID: N/A
- 330 LEWIS ST

**MACKAY, GILLIAN, MD**
Provider ID: N/A
- 16950 VIA TAZON
  SAN DIEGO, CA 92127
  Effective as of 01-DEC-23

**MACKAY, GILLIAN, MD**
Provider ID: N/A
- 6030 VILLAGE WAY
  SAN DIEGO, CA 92130
  Effective as of 01-DEC-23

**MELENDEZ, ARIANA, MD**
Provider ID: N/A
- 4168 FRONT ST
  SAN DIEGO, CA 92103
  Effective as of 01-JUN-23

**MELENDEZ, ARIANA, MD**
Provider ID: N/A
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Effective as of 01-JUN-23

**MENDEZ, DIEGO, MD**
Provider ID: N/A
- 950 S EUCLID AVE
  SAN DIEGO, CA 92114
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<td>ERENDIRA LUCILLE, MD</td>
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<td>200 W ARBOR DR</td>
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<td>MD†</td>
<td>5555 RESERVOIR DR STE 205</td>
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### OCCUPATIONAL MEDICINE

**JACKSON, CODY, MD**  
Provider ID: N/A  
- 3900 5TH AVE STE 110  
  SAN DIEGO, CA 92103  
Teleservice  
Effective as of 01-MAY-22

**HUDSON, BONNIE, OT**  
Provider ID: N/A  
- 88 E BONITA RD  
  STE C  
  SAN DIEGO, CA 92121  
Effective as of 01-NOV-21

**LOPEZ, ALYSSA-NICOLE, OT**  
Provider ID: N/A  
- 3750 CONVOY ST STE 201B  
  SAN DIEGO, CA 92111  
Effective as of 01-DEC-23

**MANECKE, KRISTEN, OT**  
Provider ID: N/A  
- 9333 GENESEE AVE STE 350B  
  SAN DIEGO, CA 92121  
Effective as of 01-SEP-22

### OCCUPATIONAL THERAPIST

**ARRIESGADO, MINNETT, OT**  
Provider ID: N/A  
- 16950 VIA TAZON  
  SAN DIEGO, CA 92127  
Effective as of 01-JUN-23

**CHOW, JENNIFER, OT**  
Provider ID: N/A  
- 3750 CONVOY ST STE 201B  
  SAN DIEGO, CA 92111  
Effective as of 01-DEC-23

**CUA, NICOLE, OT**  
Provider ID: N/A  
- 3750 CONVOY ST STE 201B  
  SAN DIEGO, CA 92111  
Effective as of 01-MAR-24

**FARHAT, KELLI, OT**  
Provider ID: N/A  
- 3750 CONVOY ST STE 201B  
  SAN DIEGO, CA 92111  
Effective as of 01-APR-22

**HUDSON, BONNIE, OT**  
Provider ID: N/A  
- 4445 EASTGATE MALL STE 103  
  SAN DIEGO, CA 92121  
Effective as of 01-NOV-21

**ARYA, MALVIKA, MD**  
Provider ID: N/A  
- 4060 4TH AVE STE 610  
  SAN DIEGO, CA 92103  
Effective as of 01-SEP-23

**ARYA, MALVIKA, MD**  
Provider ID: N/A  
- 200 W ARBOR DR  
  SAN DIEGO, CA 92103  
Effective as of 01-SEP-23

**ARYA, MALVIKA, MD**  
Provider ID: N/A  
- 3020 CHILDRENS WAY  
  SAN DIEGO, CA 92123  
Effective as of 01-SEP-23

**AVALLONE, THOMAS, MD**  
Provider ID: N/A  
- 5330 CARROLL CANYON RD STE 210  
  SAN DIEGO, CA 92121  
Effective as of 01-MAR-24

**AVALLONE, THOMAS, MD†**  
Provider ID: N/A  
- 3939 3RD AVE  
  SAN DIEGO, CA 92103  
Effective as of 01-SEP-23

**BINDER, NICHOLAS, MD†**  
Provider ID: N/A  
- 6945 EL CAJON BLVD  
  SAN DIEGO, CA 92115  
Effective as of 01-JAN-21

**BINDER, NICHOLAS, MD†**  
Provider ID: N/A  
- 6945 EL CAJON BLVD  
  SAN DIEGO, CA 92115  
Effective as of 01-MAR-18

**BINDER, NICHOLAS, MD†**  
Provider ID: N/A  
- 6945 EL CAJON BLVD  
  SAN DIEGO, CA 92115  
Effective as of 01-MAR-18

---

[Your PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。]
您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21
HUYNH, PAUL, MD
Provider ID: N/A
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JAN-21
HUYNH, PAUL, MD
Provider ID: N/A
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-OCT-22
JACOBSEN, BRADLEY, MD
Provider ID: N/A
7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Effective as of 01-OCT-23
JIN, MAN, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23
KEEFE, KELLY, MD
Provider ID: N/A
3969 4TH AVE STE 301
SAN DIEGO, CA 92103
Effective as of 01-SEP-15
KHAN, FAHAD, MD
Provider ID: N/A
233 LEWIS ST
SAN DIEGO, CA 92103
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KHAN, FAHAD, MD
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KHAN, FAHAD, MD
Provider ID: N/A
233 LEWIS ST
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KATIB, NORA, MD
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Effective as of 01-JAN-21
KATIB, NORA, MD
Provider ID: N/A
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Effective as of 01-MAR-24
LANG, PAUL, MD
Provider ID: N/A
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23
LANG, PAUL, MD
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200 W ARBOR DR
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MANI, NASRIN, MD
Provider ID: N/A
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Effective as of 01-JUN-23
MCGRAW, JOSEPH, MD
Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22
MCGRAW, JOSEPH, MD
Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22
MORRISON-REYES, JOSHUA, MD
Provider ID: N/A
6945 EL CAJON BLVD
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Provider ID: N/A
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SAN DIEGO, CA 92115
Effective as of 01-JUN-18
MORRISON-REYES, JOSHUA, MD
Provider ID: N/A
6945 EL CAJON BLVD
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*Your PCP's provider group may have its own network's mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require prior authorization from the mental health service providers to be covered by Blue Shield.

To online obtain the mental health service providers list, please visit blueshieldca.com/fad.
### C1. 網絡內提供者清單
#### 專科護理醫師

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C1. 網絡內提供者清單

專科護理醫師

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<th>聯絡</th>
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<td>SMITH, MARK, MD</td>
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<td>SMITH, WILLIAM, MD</td>
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<td>Effective as of 01-SEP-22</td>
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</tr>
</tbody>
</table>

Teleservice 644
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-SEP-21

DYER, SHARON, OD
Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-FEB-24

DYER, SHARON, OD†
Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

EL-MOGHRABI, ROULA, OD†
Provider ID: N/A
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Effective as of 01-SEP-22

HAN, SUL KI, OD†
Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

HO, HOANG MINH, OD
Provider ID: N/A
10737 CAMINO RUIZ STE 215-220
SAN DIEGO, CA 92126
Effective as of 01-JAN-21

HO, HOANG MINH, OD
Provider ID: N/A
7345 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

HO, HOANG MINH, OD
Provider ID: N/A
4206 44TH ST
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

JOMOC, CAITLIN, OD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

JOMOC, CAITLIN, OD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-FEB-24

JULAZADEH, SARA, OD†
Provider ID: N/A
3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

KHALIL, VADY, OD†
Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KHALIL, VADY, OD†
Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-NOV-22

KIM, PHILIP, OD†
Provider ID: N/A
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-MAR-22

MARR, RYAN, OD
Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-DEC-22

MARR, RYAN, OD
Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-DEC-22

RING, ROBERT, OD
Provider ID: N/A
13223 BLACK MOUNTAIN RD STE 6
SAN DIEGO, CA 92129
Effective as of 01-FEB-24

SCHWAB, GARY, OD†
Provider ID: N/A
4290 POLK AVE
SAN DIEGO, CA 92105
Effective as of 01-JUL-22

SCHWAB, GARY, OD†
Provider ID: N/A
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Effective as of 01-JUL-22

TAUNTON, PHILIP, OD†
Provider ID: N/A
3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

TAUNTON, PHILIP, OD†
Provider ID: N/A
3939 3RD AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

TONNU, ANH, OD†
Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-JAN-21

TONNU, ANH, OD†
Provider ID: N/A
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Effective as of 01-SEP-22
C1. 網絡內提供者清單

專科護理醫師

TONNU, ANH, OD†
Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-SEP-22

TONNU, ANH, OD†
Provider ID: N/A
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Effective as of 01-JAN-21

VINH, JOHN, OD†
Provider ID: N/A
2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

VINH, JOHN, OD†
Provider ID: N/A
2240 E PLAZA BLVD
STE F AND G
SAN DIEGO, CA 92102
Effective as of 01-SEP-20

YU, CAROL, OD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD
Provider ID: N/A
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

YU, CAROL, OD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

ORAL MAXILLOFACIAL SURGEON

ELI, BRADLEY, DMD
Provider ID: N/A
5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MEHROTRA, SACHI, DDS
Provider ID: N/A
5830 OBERLIN DR STE 202
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

OTOLARYNGOLOGY

ABDOU, RAMI, MD†
Provider ID: N/A
5405 OBERLIN DR
SAN DIEGO, CA 92121
Effective as of 01-AUG-22

BANTHIA, VISHAL, MD†
Provider ID: N/A
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-AUG-21

BANTHIA, VISHAL, MD†
Provider ID: N/A
5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-SEP-21

BRUMUND, KEVIN, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-OCT-19

BRUMUND, KEVIN, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-SEP-22

BUSH, JAMES, MD†
Provider ID: N/A
3805 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

CALIFANO, JOSEPH, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-JAN-21

CALIFANO, JOSEPH, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-23

CALIFANO, JOSEPH, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-SEP-23

CALZADA, AUDREY, MD†
Provider ID: N/A
5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-OCT-19

CALZADA, AUDREY, MD†
Provider ID: N/A
5405 OBERLIN DR
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-SEP-21

* Please note, certain services may require prior authorization from Blue Shield before they can be covered.

For online access to the provider list, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單
專科護理醫師

CALZADA, AUDREY, MD†
Provider ID: N/A
adal 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

CHANG, EDWARD, MD
Provider ID: N/A
adal 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-OCT-22

COFFEY, CHARLES, MD
Provider ID: N/A
adal 5405 OBERLIN DR FL 2
SAN DIEGO, CA 92121
Effective as of 01-MAR-24

COFFEY, CHARLES, MD
Provider ID: N/A
adal 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

COFFEY, CHARLES, MD†
Provider ID: N/A
adal 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

DECONDE, ADAM, MD
Provider ID: N/A
adal 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

DECONDE, ADAM, MD
Provider ID: N/A
adal 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

DECONDE, ADAM, MD
Provider ID: N/A
adal 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

DONALDSON, CHADWICK, MD†
Provider ID: N/A
adal 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

DRISKILL, BRENT, MD†
Provider ID: N/A
adal 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

DRISKILL, BRENT, MD†
Provider ID: N/A
adal 4033 3RD AVE STE 104
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FRIEDMAN, RICK, MD
Provider ID: N/A
adal 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

FRIEDMAN, RICK, MD
Provider ID: N/A
adal 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GUO, THERESA, MD
Provider ID: N/A
adal 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GILANI, SAPIDENH, MD
Provider ID: N/A
adal 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GILANI, SAPIDENH, MD
Provider ID: N/A
adal 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GILANI, SAPIDENH, MD
Provider ID: N/A
adal 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

GILANI, SAPIDENH, MD
Provider ID: N/A
adal 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

GILANI, SAPIDENH, MD
Provider ID: N/A
adal 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

GUO, THERESA, MD
Provider ID: N/A
adal 8899 UNIVERSITY CENTER
C1. 網絡內提供者清單

專科護理醫師

HARRIS, JEFFREY, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HARRIS, JEFFREY, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

HAUFF, SAMANTHA, MD†
Provider ID: N/A
4282 GENESEE AVE STE 202
SAN DIEGO, CA 92117
Effective as of 01-MAY-23

HAUFF, SAMANTHA, MD†
Provider ID: N/A
4282 GENESEE AVE STE 201
SAN DIEGO, CA 92117
Effective as of 01-APR-23

HAUFF, SAMANTHA, MD†
Provider ID: N/A
4282 GENESEE AVE STE 202
SAN DIEGO, CA 92117
Effective as of 01-MAY-22

HUSSEMAN, JACOB, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-AUG-23

HUSSEMAN, JACOB, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-AUG-23

JANSEN, CORNELIUS, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

JANSEN, CORNELIUS, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

KARI, ELINA, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

KARI, ELINA, MD

C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MAGIT, ANTHONY, MD
Provider ID: N/A
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Effective as of 01-OCT-20

MAGIT, ANTHONY, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

MATSUOKA, AKIHIRO, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

MIYA, GARY, MD†
Provider ID: N/A
4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-18

NGUYEN, QUYEN, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

NGUYEN, QUYEN, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

SALL, EDWARD, DDS
Provider ID: N/A
5471 KEARNY VILLA RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SCHAEFFER, CYNTHIA, MD†
Provider ID: N/A
292 EUCLID AVE STE 115
SAN DIEGO, CA 92114
Effective as of 01-JAN-21

SCHALCH LEPE, PAUL, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD²
Provider ID: N/A
4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

SCHALCH LEPE, PAUL, MD
Provider ID: N/A
4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

TORCHINSKY, CYRUS, MD†
Provider ID: N/A
4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-JAN-18

TORCHINSKY, CYRUS, MD†
Provider ID: N/A
4060 4TH AVE STE 410
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

VAHABZADEH-HAGH, ANDREW, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

VAHABZADEH-HAGH, ANDREW, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

WATSON, DEBORAH, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

WATSON, DEBORAH, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD
Provider ID: N/A
200 W ARBOR DR STE 505
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

WEISSBROD, PHILIP, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

YAN, CAROL, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

YAN, CAROL, MD
Provider ID: N/A
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

YAN, CAROL, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

YAN, CAROL, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

USMANI, AMENA, MD
Provider ID: N/A
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-APR-23

PATHOLOGY ANATOMIC CLINICAL

LIN, GRACE, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-FEB-22

MAHOOTI, SEPI, MD†
Provider ID: N/A
16835 W BERNARDO DR STE 212
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-DEC-22

SONG, WEI, MD
Provider ID: N/A
10300 CAMPUS POINT DR
SAN DIEGO, CA 92121
Effective as of 01-JUL-23

PEDIATRIC RADIOLOGY

DWEK, JERRY, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

DWEK, JERRY, MD†
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

DWEK, JERRY, MD†
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

EVORA, DARRYL, MD
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

EVORA, DARRYL, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22
C1. 網絡內提供者清單

專科護理醫師

**EVORA, DARRYL, MD**
 Provider ID: N/A
  - 330 LEWIS ST
  - SAN DIEGO, CA 92103
  - Effective as of 01-JAN-22

**KONING, JEFFREY, MD**
 Provider ID: N/A
  - 200 W ARBOR DR
  - SAN DIEGO, CA 92103
  - Effective as of 01-JAN-22

**KONING, JEFFREY, MD**
 Provider ID: N/A
  - 6655 ALVARADO RD
  - SAN DIEGO, CA 92120
  - Effective as of 01-FEB-24

**KONING, JEFFREY, MD**
 Provider ID: N/A
  - 330 LEWIS ST STE 202
  - SAN DIEGO, CA 92103
  - Effective as of 01-OCT-21

**KRUK, PETER, MD**
 Provider ID: N/A
  - 6655 ALVARADO RD
  - SAN DIEGO, CA 92120
  - Effective as of 01-FEB-24

**PUGMIRE, BRIAN, MD**
 Provider ID: N/A
  - 6655 ALVARADO RD
  - SAN DIEGO, CA 92120
  - Effective as of 01-JAN-22

**PUGMIRE, BRIAN, MD**
 Provider ID: N/A
  - 330 LEWIS ST STE 202
  - SAN DIEGO, CA 92103
  - Effective as of 01-OCT-21

**PUGMIRE, BRIAN, MD**
 Provider ID: N/A
  - 200 W ARBOR DR

**GIBONEY, JENNIFER, MD**
 Provider ID: N/A
  - 7011 LINDA VISTA RD
  - SAN DIEGO, CA 92111
  - Effective as of 01-FEB-23

**GIBONEY, JENNIFER, MD**
 Provider ID: N/A
  - 4305 UNIVERSITY AVE STE 150
  - SAN DIEGO, CA 92105
  - Effective as of 01-FEB-23

**GROBMAN, LILLIAN, MD**
 Provider ID: N/A
  - 200 W ARBOR DR
  - SAN DIEGO, CA 92103
  - Effective as of 01-MAR-22

**KARMAKAR, KANKA, MD**
 Provider ID: N/A
  - 10737 CAMINO RUIZ STE 235
  - SAN DIEGO, CA 92126
  - Effective as of 01-JAN-21

**MARC AURELE, KRISHELLE, MD**
 Provider ID: N/A
  - 7910 FROST ST STE 230
  - SAN DIEGO, CA 92123
  - Effective as of 01-SEP-23

**SONG, RICHARD, MD**
 Provider ID: N/A
  - 7910 FROST ST STE 230
  - SAN DIEGO, CA 92123
  - Effective as of 01-SEP-23

**SUTTNER, DENISE, MD**
 Provider ID: N/A
  - 7910 FROST ST STE 230
  - SAN DIEGO, CA 92123
C1. 網絡內提供者清單

有效日期為 01-SEP-23

WEISS, KATHERINE, MD
Provider ID: N/A
7910 FROST ST STE 230
SAN DIEGO, CA 92123
有效日期為 01-SEP-23

ZAHEER, AARON, MD‡
Provider ID: N/A
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
有效日期為 01-SEP-22

ZAHEER, AARON, MD‡
Provider ID: N/A
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
有效日期為 01-SEP-22

PHYS MED/ REHAB PAIN
MEDICINE

KATZEN, SETH, DO
Provider ID: N/A
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121
有效日期為 01-MAR-24

KATZEN, SETH, DO
Provider ID: N/A
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121
有效日期為 01-AUG-23

KOLODGE, GAVIN, DO
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
有效日期為 01-JUN-23

RICHARDSON, HENRY, MD‡
Effective as of 01-SEP-23

BULLOCK, ANDREW, DO
Provider ID: N/A
1855 1ST AVE STE 200B
SAN DIEGO, CA 92101
有效日期為 01-APR-24

BULLOCK, ANDREW, DO‡
Provider ID: N/A
1855 1ST AVE STE 200
SAN DIEGO, CA 92101
有效日期為 01-JUL-22

BULLOCK, ANDREW, DO‡
Provider ID: N/A
1855 1ST AVE STE 200
SAN DIEGO, CA 92101
有效日期為 01-JAN-21

CHANG, ENOCH, MD
Provider ID: N/A
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120
有效日期為 01-SEP-23

CHANG, ENOCH, MD
Provider ID: N/A
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120
有效日期為 01-SEP-23

TAHAEI, SEYED, MD‡
Provider ID: N/A
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Teleservice
有效日期為 01-OCT-22

PHYSICIANS ASSISTANT

GAVRILYUK, OLEG, MD‡
Provider ID: N/A
6699 ALVARADO RD STE 2302
SAN DIEGO, CA 92120
有效日期為 01-SEP-22

GAVRILYUK, OLEG, MD‡
Provider ID: N/A
6699 ALVARADO RD STE 2302
SAN DIEGO, CA 92120
有效日期為 01-SEP-20

KATZEN, SETH, DO
Provider ID: N/A
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121
有效日期為 01-APR-23

KATZEN, SETH, DO
Provider ID: N/A
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121
有效日期為 01-NOV-22

KOLODGE, GAVIN, DO
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
有效日期為 01-SEP-23

SCOTT, ROBERT, MD
Provider ID: N/A
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120
有效日期為 01-FEB-24

TAMAI, KAZUO, MD
Provider ID: N/A
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120
有效日期為 01-FEB-24

GAVRILYUK, OLEG, MD‡
Provider ID: N/A
6699 ALVARADO RD STE 2302
SAN DIEGO, CA 92120
Teleservice
有效日期為 01-OCT-22

PHYSICIANS ASSISTANT
### C1. 網絡內提供者清單

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<tr>
<th>專科護理醫師</th>
<th>地址</th>
<th>地區</th>
<th>電話</th>
<th>有效日期</th>
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<td>ABRAHAMSEN, KELSEY, PA</td>
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<td>3434 MIDWAY DR STE 2001</td>
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<td>HOGer, christina, Pa</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad.
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-OCT-23

HUNTER, JACOB, PA
Provider ID: N/A
archs 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

HUNTER, JACOB, PA²
Provider ID: N/A
archs 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

HUNTER, JACOB, PA²
Provider ID: N/A
archs 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-23

KHALEGHI, MANI, PA²
Provider ID: N/A
archs 5395 RUFFIN RD STE 204
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

LEWIS, DEVON, PA
Provider ID: N/A
archs 555 W C ST STE 102
SAN DIEGO, CA 92101
Teleservice
Effective as of 01-AUG-22

LINDemann, CHRISTINA, PA²
Provider ID: N/A
archs 4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

LONGOBARDO, FRANCESCA, PA²
Provider ID: N/A
archs 9333 GENESEE AVE STE 350A
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

MADAN, SAKSHI, PA²
Provider ID: N/A
archs 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-AUG-22

MARTIN, HALEY, PA
Provider ID: N/A
archs 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-24

MERCER, KELLY, PA²
Provider ID: N/A
archs 4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

MERCER, KELLY, PA²
Provider ID: N/A
archs 4171 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-APR-21

MOLINA, MYRNA, PA
Provider ID: N/A
archs 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-APR-22

MOORMAN, KRISTA, PA
Provider ID: N/A
archs 9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-MAR-23

MURRAY, BREANNA, PA
Provider ID: N/A
archs 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-FEB-21

NELMS, MICHAEL, PA²
Provider ID: N/A
archs 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

NGUYEN, THUY-VY, PA²
Provider ID: N/A
archs 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-22

NGUYEN, THUY-VY, PA²
Provider ID: N/A
archs 4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAR-22

NGUYEN, THUY-VY, PA²
Provider ID: N/A
archs 9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-MAR-23

NGUYEN, THUY-VY, PA²
Provider ID: N/A
archs 9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Teleservice
Effective as of 01-MAR-22
C1. 網絡內提供者清單
專科護理醫師

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<td>ALMIRANTE, MARIA, DPM</td>
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<td>CULLEN, BENJAMIN, DPM†</td>
<td>N/A</td>
<td>2650 CAMINO DEL RIO N STE 101</td>
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<td>CA</td>
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<td>FOYGELMAN, ALEKSANDR, DPM</td>
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<td>1016 OUTER RD</td>
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C1. 網絡內提供者清單

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C1. 網絡內提供者清單

PSYCHIATRY

STERN, ANNA, MD
Provider ID: N/A
4142 ADAMS AVE STE 102
SAN DIEGO, CA 92116
Effective as of 01-JAN-21

BEVINS, ELIZABETH, MD
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BEVINS, ELIZABETH, MD
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BINDAL, ANKUR, MD†
Provider ID: N/A
6496 WEATHERS PL STE 100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†
Provider ID: N/A
6496 WEATHERS PL STE 100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BINDAL, ANKUR, MD†
Provider ID: N/A
6496 WEATHERS PL STE 100
SAN DIEGO, CA 92121
Effective as of 01-SEP-21

BOBO, JERRY, MD†
Provider ID: N/A
6496 WEATHERS PL STE 100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

BOBO, JERRY, MD†
Provider ID: N/A
6496 WEATHERS PL STE 100
SAN DIEGO, CA 92121
Effective as of 01-SEP-22

CHAUHAN, SMIT, MD†
Provider ID: N/A
7850 VISTA HILL AVE
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

CHAUHAN, SMIT, MD†
Provider ID: N/A
7850 VISTA HILL AVE
SAN DIEGO, CA 92123
Effective as of 01-MAY-22

FANOUS, ASHRAF, MD
Provider ID: N/A
8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FANOUS, ASHRAF, MD
Provider ID: N/A
8775 AERO DR STE 238
SAN DIEGO, CA 92123
Effective as of 01-MAY-23

FITZGERALD, MICHAEL, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

FITZGERALD, MICHAEL, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-APR-22

GLEICHMAN, JULIA, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GLEICHMAN, JULIA, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

GUTFLAIS, ERIC, MD
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GUTFLAIS, ERIC, MD
Provider ID: N/A
6655 ALVARADO RD
C1. 網絡內提供者清單

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<td>HANAGAMI, CORI, MD</td>
<td>4550 KEARNY VILLA RD STE 116, SAN DIEGO, CA 92123</td>
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<td>HERSEVOORT, SHAWN, MD</td>
<td>4550 KEARNY VILLA RD STE 116, SAN DIEGO, CA 92123</td>
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<td>HERSEVOORT, SHAWN, MD</td>
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<td>HERSEVOORT, SHAWN, MD</td>
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<td>HERSEVOORT, SHAWN, MD</td>
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<td>JOHNSON, TANNER, MD</td>
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<td>JOHN, TANNER, MD</td>
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<td>JOSHI, YASH, MD</td>
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<td>KARANJIA, NAVAZ, MD</td>
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<td>KARANJIA, NAVAZ, MD</td>
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KARIPPOT, ANOOP, MD
Provider ID: N/A
- 10672 WEXFORD ST STE 280
  SAN DIEGO, CA 92131
Teleservice
Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD
Provider ID: N/A
- 10672 WEXFORD ST STE 280
  SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD
Provider ID: N/A
- 10672 WEXFORD ST STE 280
  SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUN-22

KARRIS, BIANCA, MD
Provider ID: N/A
- 8775 AERO DR STE 238
  SAN DIEGO, CA 92123
Effective as of 01-MAR-23

KEIFER, JASON, MD
Provider ID: N/A
- 4452 PARK BLVD STE 302
  SAN DIEGO, CA 92116
Effective as of 01-APR-23

KEIFER, JASON, MD
Provider ID: N/A
- 4452 PARK BLVD STE 302
  SAN DIEGO, CA 92116
Effective as of 01-MAR-24

LEDBETTER, ALEX, DO
Provider ID: N/A
- 6655 ALVARADO RD
  SAN DIEGO, CA 92120
Effective as of 01-APR-23

LEDBETTER, ALEX, DO
Provider ID: N/A
- 6655 ALVARADO RD
  SAN DIEGO, CA 92120
Effective as of 01-MAR-24

LEVINE, REED, MD
Provider ID: N/A
- 3434 MIDWAY DR STE 2001
  SAN DIEGO, CA 92110
Effective as of 01-APR-23

LEVINE, REED, MD
Provider ID: N/A
- 3434 MIDWAY DR STE 2001
  SAN DIEGO, CA 92110
Effective as of 01-APR-23

LI, XIA, MD
Provider ID: N/A
- 16918 DOVE CANYON RD STE 100
  SAN DIEGO, CA 92127
Effective as of 01-AUG-21

MIRON, JEAN-PHILIPPE, MD
Provider ID: N/A
- 16918 DOVE CANYON RD STE 100
  SAN DIEGO, CA 92127
Effective as of 01-APR-23

MOORE, SHAVON, MD
Provider ID: N/A
- 4510 EXECUTIVE DR
  SAN DIEGO, CA 92121
Effective as of 01-APR-23

MOORE, SHAVON, MD
Provider ID: N/A
- 4510 EXECUTIVE DR
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Effective as of 01-APR-23

MORRIS, RAPHAEL, MD
Provider ID: N/A
- 12264 EL CAMINO REAL STE 202
  SAN DIEGO, CA 92130
Effective as of 01-FEB-24

MORRIS, RAPHAEL, MD
Provider ID: N/A
- 12264 EL CAMINO REAL STE 203
  SAN DIEGO, CA 92130
Effective as of 01-FEB-24
### C1. 網絡內提供者清單

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<td>PLOESSER, MARKUS, MD</td>
<td>N/A</td>
<td>1855 1ST AVE STE 200B, SAN DIEGO, CA 92101</td>
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<td>1855 1ST AVE STE 200B, SAN DIEGO, CA 92101</td>
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<td>PLOESSER, MARKUS, MD</td>
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<td>有效日期: 01-FEB-23</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-FEB-23

QAYOUMI, WALI, MD
Provider ID: N/A
-Headers-
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

QAYOUMI, WALI, MD⁠
Provider ID: N/A
-Headers-
4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

QAYOUMI, WALI, MD⁠
Provider ID: N/A
-Headers-
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

QAYOUMI, WALI, MD⁠
Provider ID: N/A
-Headers-
4510 EXECUTIVE DR STE
325
SAN DIEGO, CA 92121
Effective as of 01-OCT-21

RIBEIRO CALDAS DOMINGUES, ISABEL, MD⁠
Provider ID: N/A
-Headers-
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

RIBEIRO CALDAS DOMINGUES, ISABEL, MD⁠
Provider ID: N/A
-Headers-
350 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-FEB-21

SALGUERO GALLAND, MARIO, MD
Provider ID: N/A
-Headers-
4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD
Provider ID: N/A
-Headers-
4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD⁠
Provider ID: N/A
-Headers-
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

SALGUERO GALLAND, MARIO, MD⁠
Provider ID: N/A
-Headers-
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

SALGUERO GALLAND, MARIO, MD⁠
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4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD
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4185 FAIRMOUNT AVE
SAN DIEGO, CA 92105
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Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD
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4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

SALGUERO GALLAND, MARIO, MD
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SAN DIEGO, CA 92105
Teleservice
Effective as of 01-SEP-21

SALGUERO GALLAND, MARIO, MD
Provider ID: N/A
-Headers-
4157 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

SALGUERO GALLAND, MARIO, MD
Provider ID: N/A
-Headers-
4187 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Teleservice
Effective as of 01-JUN-23

TADROS, EMAD, MD⁠
Provider ID: N/A
-Headers-
4060 4TH AVE STE 102
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

TADROS, EMAD, MD⁠
Provider ID: N/A
-Headers-
4060 4TH AVE STE 102
SAN DIEGO, CA 92103

C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-JAN-23

TADROS, EMAD, MD†
Provider ID: N/A
4060 4TH AVE STE 102
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TADROS, EMAD, MD†
Provider ID: N/A
4060 4TH AVE STE 102
SAN DIEGO, CA 92103
Effective as of 01-JAN-23

TUASON, NORBERTO, MD†
Provider ID: N/A
438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-NOV-23

TUASON, NORBERTO, MD†
Provider ID: N/A
438 CAMINO DEL RIO S
STE 106
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-NOV-23

WEISSMAN, CORY, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-DEC-21

WEISSMAN, CORY, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Effective as of 01-DEC-21

YAGUDAYEVA, RAISA, DO†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-22

YAGUDAYEVA, RAISA, DO†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-22

YAGUDAYEVA, RAISA, DO†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAY-22

PSYCHIATRY CHILD

KARIPPOT, ANOOP, MD†
Provider ID: N/A
10672 WEXFORD ST STE 280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-SEP-15

KARIPPOT, ANOOP, MD†
Provider ID: N/A
10672 WEXFORD ST STE 280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUN-22

KARIPPOT, ANOOP, MD†
Provider ID: N/A
10672 WEXFORD ST STE 280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD
Provider ID: N/A
10672 WEXFORD ST STE 280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD
Provider ID: N/A
10672 WEXFORD ST STE 280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JUL-22

NICHOLS, ALPHONSO, MD
Provider ID: N/A
10672 WEXFORD ST STE 280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD
Provider ID: N/A
10672 WEXFORD ST STE 280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-JAN-23

NICHOLS, ALPHONSO, MD
Provider ID: N/A
10672 WEXFORD ST STE 280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-Jan-23

NICHOLS, ALPHONSO, MD
Provider ID: N/A
10672 WEXFORD ST STE 280
SAN DIEGO, CA 92131
Teleservice
Effective as of 01-SEP-15
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<td>Psychiatry Sleep Medicine</td>
<td>N/A</td>
<td>10672 WEXFORD ST STE 280</td>
<td>01-AUG-22</td>
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<td>BHAJU, JESHMIN, PhD†</td>
<td>Psychiatry Sleep Medicine</td>
<td>N/A</td>
<td>330 LEWIS ST SAN DIEGO, CA 92103</td>
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<td>BADER, Rachel, PSYD</td>
<td>Psychologist</td>
<td>N/A</td>
<td>8899 UNIVERSITY CENTER LN SAN DIEGO, CA 92122</td>
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**PULMONARY DISEASES**

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<td>BAO, GANG, MD</td>
<td>5507 EL CAJON BLVD</td>
<td>N/A</td>
<td>01-SEP-22</td>
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<td>LE, HUAN, MD</td>
<td>6699 ALVARADO RD</td>
<td>N/A</td>
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*Note: All providers listed are available as of the effective dates specified.*
Effective as of 01-JUL-22

LE, HUAN, MD†
Provider ID: N/A
(Profile Image)
5507 EL CAJON BLVD STE C
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JAN-21

LE, HUAN, MD†
Provider ID: N/A
(Profile Image)
5507 EL CAJON BLVD STE C
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JAN-21

LE, HUAN, MD†
Provider ID: N/A
(Profile Image)
5507 EL CAJON BLVD STE C
SAN DIEGO, CA 92115
Teleservice
Effective as of 01-JAN-21

MCGUIRE, WILLIAM, MD
Provider ID: N/A
(Profile Image)
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

MUNOZ PINEDA, JORGE, MD
Provider ID: N/A
(Profile Image)
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD
Provider ID: N/A
(Profile Image)
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

MUNOZ PINEDA, JORGE, MD
Provider ID: N/A
(Profile Image)
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

PEARCE, ALEX, MD
Provider ID: N/A
(Profile Image)
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

PEARCE, ALEX, MD
Provider ID: N/A
(Profile Image)
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

RANCHES, GREGORY, MD†
Provider ID: N/A
(Profile Image)
501 WASHINGTON ST STE 725
SAN DIEGO, CA 92103
Effective as of 01-AUG-20

RANCHES, GREGORY, MD†
Provider ID: N/A
(Profile Image)
501 WASHINGTON ST STE 725
SAN DIEGO, CA 92103
Effective as of 01-APR-19

RANCHES, GREGORY, MD†
Provider ID: N/A
(Profile Image)
501 WASHINGTON ST STE 725
SAN DIEGO, CA 92103
Effective as of 01-APR-19

RANCHES, GREGORY, MD†
Provider ID: N/A
(Profile Image)
501 WASHINGTON ST STE 725
SAN DIEGO, CA 92103
Effective as of 01-APR-19

RESNIKOFF, PAMELA, MD†
Provider ID: N/A
(Profile Image)
501 WASHINGTON ST STE 725
SAN DIEGO, CA 92103
Effective as of 01-MAY-20

SPITZ, BRADLEY, MD
Provider ID: N/A
(Profile Image)
501 WASHINGTON ST STE 725
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

SPITZ, BRADLEY, MD
Provider ID: N/A
(Profile Image)
501 WASHINGTON ST STE 725
SAN DIEGO, CA 92103
Effective as of 01-MAY-23

WONG, STEVEN, MD†
Provider ID: N/A
(Profile Image)
501 WASHINGTON ST STE 725
SAN DIEGO, CA 92103
Effective as of 01-APR-19

WONG, STEVEN, MD†
Provider ID: N/A
(Profile Image)
501 WASHINGTON ST STE 725
SAN DIEGO, CA 92103
Effective as of 01-APR-19

RADIATION ONCOLOGY

BRUGGEMAN, ANDREW, MD†
Provider ID: N/A
(Profile Image)
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

BRUGGEMAN, ANDREW, MD
Provider ID: N/A
(Profile Image)
16918 DOVE CANYON RD STE 103
SAN DIEGO, CA 92127
Effective as of 01-MAR-21

CARMONA, RUBEN, MD
C1. 網絡內提供者清單

 Networking Provider List

Provider ID: N/A
9901 FROST ST
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

COLEMAN, LORI, MD†
Provider ID: N/A
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†
Provider ID: N/A
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

FULLER, DONALD, MD†
Provider ID: N/A
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

FULLER, DONALD, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

FULLER, DONALD, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†
Provider ID: N/A
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-15

IJAZ, TAHIR, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JAN-21

HATTANGADI GLUTH, JONA, MD†
Provider ID: N/A
16918 DOVE CANYON RD
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

HOOPES, DAVID, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

HOOPES, DAVID, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†
Provider ID: N/A
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

IJAZ, TAHIR, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

IJAZ, TAHIR, MD†
Provider ID: N/A
5395 RUFFIN RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

IJAZ, TAHIR, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

JABBARI, SIAVASH, MD†
Provider ID: N/A
3075 HEALTH CENTER DR
LEVEL 0
SAN DIEGO, CA 92123
Effective as of 01-OCT-22

MACEWAN, IAIN, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

MELL, LOREN, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92103
C1. 網絡內提供者清單
專科護理醫師

SAN DIEGO, CA 92127
Effective as of 01-JAN-21

MURPHY, KEVIN, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

PEJAVAR, SUNANDA, MD†
Provider ID: N/A
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

SANDHU, AJAY, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

SHARABI, ANDREW, MD†
Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†
Provider ID: N/A
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

SHIRAZI, REZA, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Effective as of 01-JUL-22

SHIRAZI, REZA, MD†
Provider ID: N/A
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SAN DIEGO, CA 92103
Effective as of 01-JUN-23

SIMPSON, DANIEL, MD†
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STE 103
SAN DIEGO, CA 92127
Effective as of 01-JAN-21

SHIRAZI, REZA, MD†
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16918 DOVE CANYON RD
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Effective as of 01-JUL-22

STRAKA, CHRISTOPHER, MD†
Provider ID: N/A
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Teleservice
Effective as of 01-JAN-21

TYE, KAREN, MD
Provider ID: N/A
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Teleservice
Effective as of 01-SEP-23

VAKILIAN, SIAVOSH, MD†
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5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-SEP-22

VAKILIAN, SIAVOSH, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†
Provider ID: N/A
3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22
C1. 網絡內提供者清單

専科護理醫師

3366 5TH AVE
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-JUL-21

VAKILIAN, SIAVOSH, MD†
Provider ID: N/A
5395 RUFFIN RD STE 103
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Teleservice
Effective as of 01-MAY-21

VAKILIAN, SIAVOSH, MD†
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Teleservice
Effective as of 01-JUL-21

VOLPP, PAUL, MD†
Provider ID: N/A
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

WEINSTEIN, GEOFFREY, MD†
Provider ID: N/A
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

WHITE, EVAN, MD†
Provider ID: N/A
16918 DOVE CANYON RD
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SAN DIEGO, CA 92127
Teleservice
Effective as of 01-NOV-22

YORK, JOHN, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

BOLAR, DIVYA, MD
Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

RADIOLOGY DIAGNOSTIC

AGANOVIC, LEJLA, MD
Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

AGANOVIC, LEJLA, MD
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

AGANOVIC, LEJLA, MD
Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

ANDERSON, GREGORY, MD†
Provider ID: N/A
3939 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-AUG-23

ANDERSON, GREGORY, MD
Provider ID: N/A
9095 RIO SAN DIEGO DR
STE 150
SAN DIEGO, CA 92108
Effective as of 01-OCT-23

BROUHA, SHARON, MD

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| CHUNG, CHRISTINE, MD |  |
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| COOPER, JAMES, MD⁠‡ |  |
| Provider ID: N/A | 3939 RUFFIN RD STE 102  
SAN DIEGO, CA 92123  
Effective as of 01-MAY-22 |
| DORROS, STEPHEN, MD |  |
| Provider ID: N/A | 408 DICKINSON ST  
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| DORROS, STEPHEN, MD |  |
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Effective as of 01-FEB-24 |
| DORROS, STEPHEN, MD |  |
| Provider ID: N/A | 8929 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
Effective as of 01-APR-23 |
| EAJAZI, ALIREZA, MD⁠‡ |  |
| Provider ID: N/A | 330 LEWIS ST  
SAN DIEGO, CA 92103  
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| EAJAZI, ALIREZA, MD⁠‡ |  |
| Provider ID: N/A | 6655 ALVARADO RD  
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| EAJAZI, ALIREZA, MD⁠‡ |  |
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| FOWLER, KATHRYN, MD |  |
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SAN DIEGO, CA 92122  
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Effective as of 01-APR-23 |
| FOWLER, KATHRYN, MD |  |
| Provider ID: N/A | 330 LEWIS ST  
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Effective as of 01-APR-23

GENTILI, AMILCARE, MD
Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

GENTILI, AMILCARE, MD
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

GENTILI, AMILCARE, MD
Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HAN, LEWIS, MD
Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

HAN, MICHAEL, MD
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408 DICKINSON ST
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C1. 網路內提供者清單

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**JACOBS, KATHLEEN, MD**
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**KARUNAMUNI, JENNIFER, MD**
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**KARUNAMUNI, JENNIFER, MD**
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**KIM, ERIC, MD**
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LIM, VIVIAN, MD
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MAREK BYKOWSKI, JULIE, MD²
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MARKS, ROBERT, MD
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SAN DIEGO, CA 92102
Effective as of 01-SEP-22

**RATTNER, ZACHARY, MD†**
Provider ID: N/A
995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JAN-21

**RATTNER, ZACHARY, MD†**
Provider ID: N/A
995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-JUL-23

**RATTNER, ZACHARY, MD†**
Provider ID: N/A
995 GATEWAY CENTER WAY STE 207
SAN DIEGO, CA 92102
Effective as of 01-AUG-21

**RESNICK, DONALD, MD**
Provider ID: N/A
8929 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Effective as of 01-APR-23

**RESNICK, DONALD, MD**
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

**RITCHIE, DAVID, MD**
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

**SADAT, SAYED, DO**
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

**SADAT, SAYED, DO**
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

**SADAT, SAYED, DO**
Provider ID: N/A
330 LEWIS ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

**SAMPATH, SRIHARI, MD**
Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

**SAMPATH, SRINATH, MD**
Provider ID: N/A
408 DICKINSON ST
SAN DIEGO, CA 92103
Effective as of 01-APR-23

*Your PCP's provider network may have its own networked mental health providers. Please refer to the list below. Direct contact with these providers may be necessary. Please note, certain services may require prior authorization from a mental health provider to be covered by Blue Shield.*

*To access the mental health provider list online, visit blueshieldca.com/fad.*
<table>
<thead>
<tr>
<th>Provider ID: N/A</th>
<th>Provider ID: N/A</th>
<th>Provider ID: N/A</th>
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<tr>
<td>408 DICKINSON ST</td>
<td>330 LEWIS ST STE 202</td>
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<td>SAN DIEGO, CA 92103</td>
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<td>Effective as of 01-AUG-21</td>
<td>Effective as of 01-AUG-21</td>
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**SAMPATH, SRIHARI, MD**  
Provider ID: N/A  
8929 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
Effective as of 01-APR-23

**SAMPATH, SRINATH, MD**  
Provider ID: N/A  
8929 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
Effective as of 01-APR-23

**SANTILLAN, CYNTIA, MD**  
Provider ID: N/A  
408 DICKINSON ST  
SAN DIEGO, CA 92103  
Effective as of 01-APR-23

**SANTILLAN, CYNTIA, MD**  
Provider ID: N/A  
8929 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
Effective as of 01-APR-23

**SEARLEMAN, ADAM, MD**  
Provider ID: N/A  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Effective as of 01-JUN-23

**SEARLEMAN, ADAM, MD**  
Provider ID: N/A  
330 LEWIS ST  
SAN DIEGO, CA 92103  
Effective as of 01-JUN-23

**SLATER, JERRY, MD**  
Provider ID: N/A  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Effective as of 01-JUN-23

**SLATER, JERRY, MD**  
Provider ID: N/A  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Effective as of 01-JUN-23

**SLATER, JERRY, MD**  
Provider ID: N/A  
16918 DOVE CANYON RD STE 103  
SAN DIEGO, CA 92127  
Teleservice  
Effective as of 01-FEB-21

**SMITAMAN, EDWARD, MD**  
Provider ID: N/A  
408 DICKINSON ST  
SAN DIEGO, CA 92103  
Effective as of 01-APR-23

**SMITAMAN, EDWARD, MD**  
Provider ID: N/A  
8929 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
Effective as of 01-APR-23

**SMITAMAN, EDWARD, MD**  
Provider ID: N/A  
6655 ALVARADO RD  
SAN DIEGO, CA 92120  
Effective as of 01-FEB-24

**SPENGLER, NATHAN, MD**  
Provider ID: N/A  
6655 ALVARADO RD  
SAN DIEGO, CA 92120  
Effective as of 01-FEB-24

**SPENGLER, NATHAN, MD**  
Provider ID: N/A  
8929 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
Effective as of 01-APR-23

**SPENGLER, NATHAN, MD**  
Provider ID: N/A  
330 LEWIS ST  
SAN DIEGO, CA 92103  
Effective as of 01-DEC-23

**SPENGLER, NATHAN, MD**  
Provider ID: N/A  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Effective as of 01-JUN-23

**STRAKA, CHRISTOPHER, MD**  
Provider ID: N/A  
16918 DOVE CANYON RD STE 103  
SAN DIEGO, CA 92127  
Teleservice  
Effective as of 01-FEB-21

**SWEET, JASON, MD**  
Provider ID: N/A  
6655 ALVARADO RD  
SAN DIEGO, CA 92120  
Effective as of 01-MAR-24

**TAMAYO-MURILLO, DORATHY, MD**  
Provider ID: N/A  
6655 ALVARADO RD  
SAN DIEGO, CA 92120  
Effective as of 01-FEB-24

**TAMAYO-MURILLO, DORATHY, MD**  
Provider ID: N/A  
408 DICKINSON ST  
SAN DIEGO, CA 92103  
Effective as of 01-APR-23

**TAMAYO-MURILLO, DORATHY, MD**  
Provider ID: N/A  
8929 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
Effective as of 01-APR-23

**THOMPSON, COLE, MD**  
Provider ID: N/A  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Effective as of 01-JUN-23
<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Address</th>
<th>Effective As Of</th>
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<tbody>
<tr>
<td>THOMPSON, COLE, MD</td>
<td>N/A</td>
<td>6655 ALVARADO RD, SAN DIEGO, CA 92120</td>
<td>01-FEB-24</td>
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<tr>
<td>THOMPSON, COLE, MD</td>
<td>N/A</td>
<td>330 LEWIS ST, SAN DIEGO, CA 92103</td>
<td>01-JUN-23</td>
</tr>
<tr>
<td>UNSDORFER, KYLE, MD</td>
<td>N/A</td>
<td>200 W ARBOR DR, SAN DIEGO, CA 92103</td>
<td>01-JUL-23</td>
</tr>
<tr>
<td>VAHDOT, NOUSHIN, MD</td>
<td>N/A</td>
<td>330 LEWIS ST, SAN DIEGO, CA 92103</td>
<td>01-JUL-23</td>
</tr>
<tr>
<td>VAKILIAN, SIAVOSH, MD</td>
<td>N/A</td>
<td>3366 5TH AVE, SAN DIEGO, CA 92103</td>
<td>01-SEP-22</td>
</tr>
<tr>
<td>YORK, JOHN, MD</td>
<td>N/A</td>
<td>6655 ALVARADO RD, SAN DIEGO, CA 92120</td>
<td>01-FEB-24</td>
</tr>
<tr>
<td>YORK, VINCENT, MD</td>
<td>N/A</td>
<td>330 LEWIS ST STE 202, SAN DIEGO, CA 92103</td>
<td>01-AUG-21</td>
</tr>
<tr>
<td>YORK, VINCENT, MD</td>
<td>N/A</td>
<td>3905 RIO SAN DIEGO DR STE 150, SAN DIEGO, CA 92108</td>
<td>01-OCT-23</td>
</tr>
<tr>
<td>YORK, VINCENT, MD</td>
<td>N/A</td>
<td>3905 RIO SAN DIEGO DR STE 150, SAN DIEGO, CA 92108</td>
<td>01-OCT-23</td>
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<tr>
<td>YORK, VINCENT, MD</td>
<td>N/A</td>
<td>3939 RUFFIN RD, SAN DIEGO, CA 92123</td>
<td>01-JAN-24</td>
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<tr>
<td>YORK, VINCENT, MD</td>
<td>N/A</td>
<td>3939 RUFFIN RD, SAN DIEGO, CA 92123</td>
<td>01-OCT-23</td>
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<tr>
<td>ZINK BRODY, GORDON, MD</td>
<td>N/A</td>
<td>3900 5TH AVE STE 110, SAN DIEGO, CA 92103</td>
<td>01-OCT-23</td>
</tr>
<tr>
<td>ZINK BRODY, GORDON, MD</td>
<td>N/A</td>
<td>3900 5TH AVE STE 110, SAN DIEGO, CA 92103</td>
<td>01-OCT-23</td>
</tr>
</tbody>
</table>

*Note: Some providers may require prior authorization for certain services.*
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-APR-21

DRIVICK, VALERIE, RD
Provider ID: N/A
栻 3900 5TH AVE STE 110
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-SEP-22

FISHER, JENNIFER, RD
Provider ID: N/A
栻 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

FISHER, JENNIFER, RD
Provider ID: N/A
栻 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

GONZALEZ, KRISTEN, RDN
Provider ID: N/A
栻 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

RUBENSTEIN, KELLY, RD
Provider ID: N/A
栻 200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

RUBENSTEIN, KELLY, RD
Provider ID: N/A
栻 4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122

Effective as of 01-JAN-24

SALCEDO, CARLA, RD
Provider ID: N/A
栻 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

SALCEDO, CARLA, RD
Provider ID: N/A
栻 4910 DIRECTORS PL
SAN DIEGO, CA 92121
Effective as of 01-JAN-24

SALCEDO, ALEXANDRA, RD
Provider ID: N/A
栻 4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

VALDEZ, KELLY, RD
Provider ID: N/A
栻 4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

VERGARA RODRIGUEZ,
DIANA, RD
Provider ID: N/A
栻 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

REGISTERED PHYSICAL
THERAPIST

ALLOS, ALEXANDER, PT
Provider ID: N/A
栻 4445 EASTGATE MALL STE
105
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

BOUTELLE, DAVID, PT
Provider ID: N/A
栻 9909 MIRA MESA BLVD
STE 120
SAN DIEGO, CA 92131
Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT
Provider ID: N/A
栻 9909 MIRA MESA BLVD
STE 120
SAN DIEGO, CA 92131
Effective as of 01-JAN-24

BOUTELLE, DAVID, PT
Provider ID: N/A
栻 9888 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-JAN-24

BOUTELLE, BARBARA, PT
Provider ID: N/A
栻 9888 CARMEL MOUNTAIN
RD STE D
SAN DIEGO, CA 92129
Effective as of 01-JAN-24

CORTEZ, AARON, PT†
Provider ID: N/A
栻 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-21

DANG, KAYLEE, PT†
Provider ID: N/A
栻 16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-MAY-21

FARRAR, COURTNEY, PT†
Provider ID: N/A
栻 7525 METROPOLITAN DR
STE 302
SAN DIEGO, CA 92108
Teleservice
Effective as of 01-JAN-24
### C1. 網絡內提供者清單

#### 專科護理醫師

<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Address</th>
<th>Effective Date</th>
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<tbody>
<tr>
<td>FARRAR, COURTNEY, PT†</td>
<td>N/A</td>
<td>3434 MIDWAY DR STE 2001 SAN DIEGO, CA 92110</td>
<td>01-DEC-22</td>
</tr>
<tr>
<td>FERRER, MIRON, PT</td>
<td>N/A</td>
<td>200 W ARBOR DR SAN DIEGO, CA 92103</td>
<td>01-JAN-24</td>
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<tr>
<td>FUREY, CINDY, PT</td>
<td>N/A</td>
<td>5555 RESERVOIR DR STE 300 SAN DIEGO, CA 92120</td>
<td>01-JAN-21</td>
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<tr>
<td>FUREY, CINDY, PT</td>
<td>N/A</td>
<td>5677 OBERLIN DR STE 106 SAN DIEGO, CA 92121</td>
<td>01-JAN-21</td>
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<tr>
<td>GRIMES, KELLY, PT</td>
<td>N/A</td>
<td>16950 VIA TAZON SAN DIEGO, CA 92127</td>
<td>01-JUN-23</td>
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<tr>
<td>HARRAH, WILLIAM, PT</td>
<td>N/A</td>
<td>9333 GENESEE AVE STE 350B SAN DIEGO, CA 92121</td>
<td>01-SEP-22</td>
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<tr>
<td>JOHNSON, KENNADY, PT</td>
<td>N/A</td>
<td>16950 VIA TAZON SAN DIEGO, CA 92127</td>
<td>01-MAR-24</td>
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<tr>
<td>MONROE, MAX, PT</td>
<td>N/A</td>
<td>11750 SORRENTO VALLEY RD STE 130 SAN DIEGO, CA 92121</td>
<td>01-DEC-21</td>
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<td>OKINAGA, PATRICK, PT</td>
<td>N/A</td>
<td>16950 VIA TAZON SAN DIEGO, CA 92127</td>
<td>01-JAN-24</td>
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<td>OKINAGA, PATRICK, PT</td>
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<td>200 W ARBOR DR SAN DIEGO, CA 92103</td>
<td>01-JAN-24</td>
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<tr>
<td>PAPA, AMY, PT</td>
<td>N/A</td>
<td>4445 EASTGATE MALL STE 103 SAN DIEGO, CA 92121</td>
<td>01-AUG-23</td>
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<tr>
<td>PAPA, AMY, PT</td>
<td>N/A</td>
<td>4445 EASTGATE MALL STE 103 SAN DIEGO, CA 92121</td>
<td>01-JUN-23</td>
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<tr>
<td>PERRONE, AIMEE, PT</td>
<td>N/A</td>
<td>4445 EASTGATE MALL STE 103 SAN DIEGO, CA 92121</td>
<td>01-NOV-21</td>
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<tr>
<td>PHILLIP, OMARI, PT†</td>
<td>N/A</td>
<td>4445 EASTGATE MALL STE 103 SAN DIEGO, CA 92121</td>
<td>01-NOV-21</td>
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<tr>
<td>ROSS, JENNY, PT</td>
<td>N/A</td>
<td>7525 METROPOLITAN DR SAN DIEGO, CA 92108</td>
<td>01-JAN-23</td>
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<td>TITH, JENNY, PT</td>
<td>N/A</td>
<td>4445 EASTGATE MALL STE 103 SAN DIEGO, CA 92121</td>
<td>01-MAY-22</td>
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<tr>
<td>TSAI, CINDY, PT</td>
<td>N/A</td>
<td>3750 CONVOY ST STE 201B SAN DIEGO, CA 92111</td>
<td>01-AUG-23</td>
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<tr>
<td>TSAI, CINDY, PT</td>
<td>N/A</td>
<td>3750 CONVOY ST STE 201B SAN DIEGO, CA 92111</td>
<td>01-JUN-23</td>
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<tr>
<td>VANDEWIELE, EMILY, PT†</td>
<td>N/A</td>
<td>16950 VIA TAZON SAN DIEGO, CA 92127</td>
<td>01-OCT-21</td>
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<tr>
<td>VASQUEZ, BENJAMIN, PT</td>
<td>N/A</td>
<td>4910 DIRECTORS PL SAN DIEGO, CA 92121</td>
<td>01-DEC-23</td>
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<td>RHEUMATOLOGY</td>
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<tr>
<td>HUYNH, DOQUYEN, MD</td>
<td>N/A</td>
<td>4520 EXECUTIVE DR SAN DIEGO, CA 92121</td>
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</tr>
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</table>
C1. 網絡內提供者清單

專科護理醫師

HUYNH, DOQUYEN, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-APR-23

KHANNA, SURABHI, MD
Provider ID: N/A
4282 GENESEE AVE STE 202
SAN DIEGO, CA 92117
Effective as of 01-APR-23

PRESS, RAYMOND, MD²
Provider ID: N/A
3965 5TH AVE STE 430
SAN DIEGO, CA 92103
Effective as of 01-OCT-19

SLEEP MEDICINE

BAO, GANG, MD²
Provider ID: N/A
6699 ALVARADO RD STE 2306
SAN DIEGO, CA 92120
Effective as of 01-JUN-21

DOMBROWSKY, JOSEPH, MD
Provider ID: N/A
5471 KEARNY VILLA RD STE 202
SAN DIEGO, CA 92123
Effective as of 01-APR-24

FINCH, CHRISTINA, MD
Provider ID: N/A
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-JUN-23

FINCH, CHRISTINA, MD
Provider ID: N/A
4168 FRONT ST
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

FLEMING, WESLEY, MD†
Provider ID: N/A
5471 KEARNY VILLA RD STE 202
SAN DIEGO, CA 92123
Teleservice
Effective as of 01-APR-22

SPEECH PATHOLOGIST

AROCHO-SALGADO, MIRELIS, SP
Provider ID: N/A
9655 GRANITE RIDGE DR STE 200
SAN DIEGO, CA 92123
Effective as of 01-JUN-22

AROCHO-SALGADO, MIRELIS, SP
Provider ID: N/A
9655 GRANITE RIDGE DR STE 200
SAN DIEGO, CA 92123
Effective as of 01-JUN-22

CALDERON MORALES, ASTRID, SP
Provider ID: N/A
7510 CLAIREMONT MESA BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-APR-24

CALDERON MORALES, ASTRID, SP
Provider ID: N/A
9655 GRANITE RIDGE DR STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-24

CALDERON MORALES, ASTRID, SP
Provider ID: N/A
11440 W BERNARDO CT STE 300
SAN DIEGO, CA 92127
Effective as of 01-APR-24

CLARK, MELISSA, SP
Provider ID: N/A
11440 W BERNARDO CT STE 300
SAN DIEGO, CA 92127
Effective as of 01-APR-22

CLARK, MELISSA, SP
Provider ID: N/A
11440 W BERNARDO CT STE 300
SAN DIEGO, CA 92127

683
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-APR-22

CLARK, MELISSA, SP
Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-22

CLARK, MELISSA, SP
Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-APR-22

CLARK, MELISSA, SP
Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 102
SAN DIEGO, CA 92111
Effective as of 01-APR-22

GONZALEZ MELENDEZ, ADALICE, SP
Provider ID: N/A

11440 W BERNARDO CT
STE 300
SAN DIEGO, CA 92127
Effective as of 01-JUN-22

GONZALEZ MELENDEZ, ADALICE, SP
Provider ID: N/A

9655 GRANITE RIDGE DR
STE 200
SAN DIEGO, CA 92123
Effective as of 01-JUN-22

KOUKEYAN, KARIN, SP
Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

KOUKEYAN, KARIN, SP
Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

THOMPSON, DANIELLE, SP
Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-JAN-24

WALSH, ERIN, SP
Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL, MD
Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD
Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92122
Effective as of 01-JUN-22

NAPOLEAN, REBECCA, SP
Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-JUN-22

SCHIEDERMAYER, BENJAMIN, SP
Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-APR-22

THOMPSON, DANIELLE, SP
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

THOMPSON, DANIELLE, SP
Provider ID: N/A

16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JAN-24

WALSH, ERIN, SP
Provider ID: N/A

8899 UNIVERSITY CENTER
LN
SAN DIEGO, CA 92122
Effective as of 01-MAY-23

SURGERY COLON SURGERY

EISENSTEIN, SAMUEL, MD
Provider ID: N/A

4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD
Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92122
Effective as of 01-JUN-22

NAPOLEAN, REBECCA, SP
Provider ID: N/A

7510 CLAIREMONT MESA
BLVD STE 103
SAN DIEGO, CA 92111
Effective as of 01-JUN-22
C1. 網絡內提供者清單

專科護理醫師

 Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

EISENSTEIN, SAMUEL, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

ISHO, MATHEW, MD†
Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

PARRY, LISA, MD†
Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

PARRY, LISA, MD†
Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

ALVORD, PAUL, MD†
Provider ID: N/A

4033 3RD AVE STE 204
SAN DIEGO, CA 92103
Effective as of 01-JAN-19

ARMANI, AVA, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

BARNES, RYAN, DO²
Provider ID: N/A

7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

BATRA, MUNISH, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-JUL-21

BATRA, MUNISH, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

BATRA, MUNISH, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

SURGERY CRITICAL CARE

ADAMS, LAURA, MD†
Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

OLSON, ERIK, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-21

VENTRO, GEORGE, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

SURGERY GENERAL

TOMAN, JEFFREY, MD†
Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

BUCKALO, JOHN, MD
Provider ID: N/A

12264 EL CAMINO REAL
STE 101
SAN DIEGO, CA 92130
Effective as of 01-SEP-17

ISHO, MATHEW, MD†
Provider ID: N/A

4060 4TH AVE STE 510
SAN DIEGO, CA 92103
Effective as of 01-NOV-11

LOPEZ, NICOLE, MD†
Provider ID: N/A

200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

LOPEZ, NICOLE, MD†
Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

PARRY, LISA, MD†
Provider ID: N/A

4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

685
C1. Network Provider List

BENCH, SHAWN, MD
Provider ID: N/A
7910 FROST ST STE 250
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

GIURGIU, DAN, MD
Provider ID: N/A
4060 4TH AVE STE 440
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HALLDORSON, JEFFREY, MD
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-DEC-17

HALLDORSON, JEFFREY, MD
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-FEB-18

HALLDORSON, JEFFREY, MD
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

HALLDORSON, JEFFREY, MD
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JAN-21

HART, MARQUIS, MD
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-JUL-21

HART, MARQUIS, MD
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-SEP-22

HORGAN, SANTIAGO, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

HORGAN, SANTIAGO, MD
Provider ID: N/A
4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD
Provider ID: N/A
4303 LA JOLLA VILLAGE
DR STE 2110
SAN DIEGO, CA 92122
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD
Provider ID: N/A
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121
Effective as of 01-DEC-21

JACOBSEN, GARTH, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-21

ELLNER, JULIE, MD
Provider ID: N/A
2878 CAMINO DEL RIO S
STE 303
SAN DIEGO, CA 92108
Effective as of 01-OCT-21

HART, MARQUIS, MD
Provider ID: N/A
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Effective as of 01-DEC-21

FARINAS, LEAH, MD
Provider ID: N/A
6699 ALVARADO RD STE 2309
SAN DIEGO, CA 92120
Effective as of 01-OCT-20

686
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<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Address</th>
<th>City, State</th>
<th>Effective Date</th>
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<td>JINDAL, RISHI, MD†</td>
<td>N/A</td>
<td>12264 EL CAMINO REAL STE 101</td>
<td>SAN DIEGO, CA 92130</td>
<td>01-AUG-18</td>
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<tr>
<td>MOLDOVAN, STEFAN, MD†</td>
<td>N/A</td>
<td>6719 ALVARADO RD STE 303</td>
<td>SAN DIEGO, CA 92120</td>
<td>01-MAR-24</td>
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<tr>
<td>KING, JUSTIN, MD†</td>
<td>N/A</td>
<td>6699 ALVARADO RD STE 2309</td>
<td>SAN DIEGO, CA 92120</td>
<td>01-JAN-21</td>
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<td>KOSOY, DANIEL, MD†</td>
<td>N/A</td>
<td>8010 FROST ST STE 510</td>
<td>SAN DIEGO, CA 92123</td>
<td>01-SEP-22</td>
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<td>LANGENBERG, BRETT, DO†</td>
<td>N/A</td>
<td>4033 3RD AVE STE 204</td>
<td>SAN DIEGO, CA 92103</td>
<td>01-JAN-19</td>
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<td>MOLDOVAN, STEFAN, MD†</td>
<td>N/A</td>
<td>6719 ALVARADO RD STE 303</td>
<td>SAN DIEGO, CA 92122</td>
<td>01-DEC-21</td>
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<td>SIŞE, MICHAEL, MD†</td>
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<td>DIEFFENBACH, BRYAN, MD</td>
<td>N/A</td>
<td>550 WASHINGTON ST STE 641</td>
<td>SAN DIEGO, CA 92103</td>
<td>01-JAN-24</td>
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<tr>
<td>MORENO MARTINEZ, ENRIQUE, MD†</td>
<td>N/A</td>
<td>6719 ALVARADO RD STE 303</td>
<td>SAN DIEGO, CA 92120</td>
<td>01-MAR-24</td>
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<tr>
<td>SALLOUM, ALEXANDER, MD†</td>
<td>N/A</td>
<td>6719 ALVARADO RD STE 303</td>
<td>SAN DIEGO, CA 92120</td>
<td>01-MAR-24</td>
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</tbody>
</table>

Your PCP’s provider group may have its own network mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require mental health service providers to obtain Blue Shield prior authorization before they can be covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

專科護理醫師

SALLOUM, ALEXANDER, MD
Provider ID: N/A
6719 ALVARADO RD STE 303
SAN DIEGO, CA 92120
Teleservice
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD
Provider ID: N/A
6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Effective as of 01-JAN-23

SALLOUM, ALEXANDER, MD
Provider ID: N/A
6402 EL CAJON BLVD STE 102
SAN DIEGO, CA 92115
Effective as of 01-MAR-24

SALLOUM, ALEXANDER, MD
Provider ID: N/A
6402 EL CAJON BLVD STE 102
SAN DIEGO, CA 92115
Effective as of 01-JUN-23

SISE, MICHAEL, MD
Provider ID: N/A
550 WASHINGTON ST STE 641
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

SISE, MICHAEL, MD
Provider ID: N/A
550 WASHINGTON ST STE 641
SAN DIEGO, CA 92103
Effective as of 01-JAN-14

SURGERY HAND

RICKARDS, ENASS, MD
Provider ID: N/A
9333 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Effective as of 01-JAN-21

SURGERY ORTHOPEDIC

STEPHENSON, SAMUEL, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-OCT-21

SURGERY NEUROLOGICAL

AMMIRATI, MARIO, MD
Provider ID: N/A
11199 SORRENTO VALLEY RD STE 203
SAN DIEGO, CA 92121
Effective as of 01-AUG-21

FLORES, BRUNO, MD
Provider ID: N/A
11199 SORRENTO VALLEY RD STE 203
SAN DIEGO, CA 92121
Effective as of 01-JAN-23

FLORES, BRUNO, MD
Provider ID: N/A
5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-APR-22

FLORES, BRUNO, MD
Provider ID: N/A
5395 RUFFIN RD STE 102
SAN DIEGO, CA 92123
Effective as of 01-FEB-21

GOEL, GUNJAN, MD
Provider ID: N/A
3750 CONVOY ST STE 301
SAN DIEGO, CA 92111
Effective as of 01-JUL-19

LEVINE, REED, MD
Provider ID: N/A
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Effective as of 01-FEB-24

OSTRUP, RICHARD, MD
Provider ID: N/A
3750 CONVOY ST STE 301
SAN DIEGO, CA 92111
Effective as of 01-SEP-20

UDANI, VIKRAM, MD
Provider ID: N/A
11199 SORRENTO VALLEY RD STE 203
SAN DIEGO, CA 92121
Effective as of 01-MAY-23

ZACHARIAH, MARCUS, MD
Provider ID: N/A
3750 CONVOY ST STE 301
SAN DIEGO, CA 92111
Effective as of 01-MAY-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN JACQUES, MD
Provider ID: N/A
7625 MESA COLLEGE DR STE 315A
SAN DIEGO, CA 92111
Effective as of 01-JUN-22

ANDRY, JAMES, MD
Provider ID: N/A
7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24
C1. 網絡內提供者清單

專科護理醫師

ANDRY, JAMES, MD
Provider ID: N/A
7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

BAWA, MANEESH, MD
Provider ID: N/A
4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

BEHR, CHRISTOPHER, MD
Provider ID: N/A
4060 4TH AVE STE 700
SAN DIEGO, CA 92103
Effective as of 01-SEP-15

BLAIS, MICAH, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUL-23

BOURLAND, BRYAN, DO
Provider ID: N/A
4910 DIRECTORS PL STE 350
SAN DIEGO, CA 92121
Effective as of 01-SEP-23

BOURLAND, BRYAN, DO
Provider ID: N/A
4910 DIRECTORS PL STE 350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

BRERETON, DANIEL, DO
Provider ID: N/A
4910 DIRECTORS PL STE 350
SAN DIEGO, CA 92121
Effective as of 01-NOV-22

BUKATA, SUSAN, MD
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

BUKATA, SUSAN, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-MAR-21

BURNIKEL, DAVID, MD
Provider ID: N/A
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120
Effective as of 01-JAN-21

BURNIKEL, DAVID, MD
Provider ID: N/A
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120
Effective as of 01-SEP-23

BURNIKEL, DAVID, MD
Provider ID: N/A
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120
Effective as of 01-SEP-24

BUKATA, SUSAN, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-NOV-21

DAVID, TAL, MD
Provider ID: N/A
4910 DIRECTORS PL STE 350
SAN DIEGO, CA 92121
Effective as of 01-NOV-24

DOWNING, KRISTOPHER, MD
Provider ID: N/A
7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

DOWNING, KRISTOPHER, MD
Provider ID: N/A
7910 FROST ST STE 340
SAN DIEGO, CA 92123
Effective as of 01-MAR-24

DUTTON, PASCUAL, MD
Provider ID: N/A
5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-OCT-23

DUTTON, PASCUAL, MD
Provider ID: N/A
5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

CAGE, DORI NEILL, MD
Provider ID: N/A
8008 FROST ST STE 403
SAN DIEGO, CA 92123
Effective as of 01-NOV-14

CHOI, JIHOON, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-SEP-21

DUTTON, PASCUAL, MD
Provider ID: N/A
3444 KEARNY VILLA RD STE 401
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-JAN-24

DUTTON, PASCUAL, MD
C1. 網絡內提供者清單

專科護理醫師

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<th>Provider ID</th>
<th>Address</th>
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<td>6719 ALVARADO RD STE 308</td>
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<td>01-JUL-23</td>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
<table>
<thead>
<tr>
<th>Provider ID: N/A</th>
<th>9333 GENESEE AVE STE 350</th>
<th>SAN DIEGO, CA 92121</th>
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<tbody>
<tr>
<td>KIMBALL, MICHAEL, MD†</td>
<td>9333 GENESEE AVE STE 350</td>
<td>SAN DIEGO, CA 92121</td>
<td>Effective as of 01-DEC-14</td>
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<tr>
<td>KIMBALL, MICHAEL, MD†</td>
<td>9339 GENESEE AVE STE 150</td>
<td>SAN DIEGO, CA 92121</td>
<td>Effective as of 01-SEP-20</td>
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<tr>
<td>KOLODGE, GAVIN, DO†</td>
<td>3750 CONVOY ST STE 201</td>
<td>SAN DIEGO, CA 92111</td>
<td>Effective as of 01-AUG-23</td>
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<tr>
<td>KOLODGE, GAVIN, DO†</td>
<td>4060 4TH AVE STE 700</td>
<td>SAN DIEGO, CA 92103</td>
<td>Effective as of 01-OCT-17</td>
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<tr>
<td>KRUGER, VAN, MD</td>
<td>4910 DIRECTORS PL STE 350</td>
<td>SAN DIEGO, CA 92121</td>
<td>Effective as of 01-OCT-23</td>
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<td>KRUGER, VAN, MD</td>
<td>4910 DIRECTORS PL STE 350</td>
<td>SAN DIEGO, CA 92121</td>
<td>Effective as of 01-OCT-23</td>
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<tr>
<td>MOHLER, LESTER, MD†</td>
<td>7485 MISSION VALLEY RD STE 104A</td>
<td>SAN DIEGO, CA 92108</td>
<td>Effective as of 01-FEB-07</td>
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<td>MOHLER, LESTER, MD†</td>
<td>7485 MISSION VALLEY RD STE 104A</td>
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<td>Effective as of 01-FEB-07</td>
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<td>MYER, JONATHAN, MD†</td>
<td>4910 DIRECTORS PL STE 350</td>
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<td>MYER, JONATHAN, MD†</td>
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<td>MOHLER, LESTER, MD†</td>
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<td>RAISZADEH, RAMIN, MD†</td>
<td>6719 ALVARADO RD STE 308</td>
<td>SAN DIEGO, CA 92120</td>
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<td>RAISZADEH, RAMIN, MD†</td>
<td>6719 ALVARADO RD STE 308</td>
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C1. 網絡內提供者清單

專科護理醫師

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RICKARDS, ENASS, MD†

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ROBKER, JERRICK, DO†

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ROSENFIELD, ALAN, MD†

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SCHULTZ, JEFFREY, MD†

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SHILLITO, MATTHEW, MD†

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C1. 網絡內提供者清單

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。

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* 4060 4TH AVE STE 700, SAN DIEGO, CA 92103 (Effective as of 01-AUG-17)

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Effective as of 01-JUL-19

WHEATLEY, BENJAMIN, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

WHEATLEY, BENJAMIN, MD
Provider ID: N/A
6655 ALVARADO RD
SAN DIEGO, CA 92120
Effective as of 01-FEB-24

YOUNGBLOOD, SCOT, MD
Provider ID: N/A
6719 ALVARADO RD STE 200
SAN DIEGO, CA 92120
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD
Provider ID: N/A
3750 CONVOY ST STE 201
SAN DIEGO, CA 92111
Effective as of 01-NOV-23

YOUNGBLOOD, SCOT, MD
Provider ID: N/A
4910 DIRECTORS PL STE 350
SAN DIEGO, CA 92121
Effective as of 01-OCT-23

YOUNGBLOOD, SCOT, MD
Provider ID: N/A
4910 DIRECTORS PL STE 350
SAN DIEGO, CA 92121
Effective as of 01-NOV-23

KUPFER, DAVID, MD†
Provider ID: N/A
5395 RUFFIN RD STE 201
SAN DIEGO, CA 92123
Effective as of 01-JUL-14

NGUYEN, KHANG, MD
Provider ID: N/A
6610 FLANDERS DR STE 101
SAN DIEGO, CA 92121
Effective as of 01-FEB-23

SURGERY THORACIC

HEMP, JAMES, MD†
Provider ID: N/A
4033 3RD AVE STE 210
SAN DIEGO, CA 92103
Effective as of 01-FEB-07

HUDSON, JESSICA, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-DEC-23

SURGICAL ONCOLOGY

CHEN, STEVEN, MD†
Provider ID: N/A
8901 ACTIVITY RD
SAN DIEGO, CA 92126
Effective as of 01-JUL-15

MEHTSUN, WINTA, MD†
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JAN-22

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C1. 網絡內提供者清單

專科護理醫生

SAN DIEGO, CA 92103
Effective as of 01-JAN-21

DICKS, BRIAN, MD
Provider ID: N/A
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-SEP-22

HOLDEN, MARC, MD
Provider ID: N/A
11770 BERNARDO PLAZA
CT STE 270
SAN DIEGO, CA 92128
Effective as of 01-OCT-22

JUMA, SAAD, MD
Provider ID: N/A
3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

KEILLER, DANNY, MD
Provider ID: N/A
3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JAN-24

JUMA, SAAD, MD
Provider ID: N/A
16950 VIA TAZON
SAN DIEGO, CA 92127
Effective as of 01-JUN-23

KATZ, JONATHAN, MD
Provider ID: N/A
11770 BERNARDO PLAZA
CT STE 270
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Effective as of 01-JAN-24

KEILLER, DANNY, MD
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JUMA, SAAD, MD
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Effective as of 01-FEB-24

NEUSTEIN, PAUL, MD
Provider ID: N/A
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-FEB-24

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專科護理醫師

4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Effective as of 01-JAN-24

NEUSTEIN, PAUL, MD
Provider ID: N/A
3444 KEARNY VILLA RD
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SAN DIEGO, CA 92123
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NGUYEN, HUNG, MD
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NGUYEN, HUNG, MD
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NGUYEN, HUNG, MD
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ROBERTS, JAMES, MD
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NEUSTEIN, PAUL, MD
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ROBERTS, JAMES, MD
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PE, MARK-RALLY, MD
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ROBERTS, JAMES, MD
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SAIDIAN, AVA, MD
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200 W ARBOR DR
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SALEM, CAROL, MD
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C1. 網絡內提供者清單

專科護理醫師

SAN DIEGO, CA 92103
Teleservice
Effective as of 01-AUG-21

UNTERBERG, STEPHEN, MD†
Provider ID: N/A
4060 4TH AVE STE 310
SAN DIEGO, CA 92103
Teleservice
Effective as of 01-DEC-21

VAPNEK, EVAN, MD†
Provider ID: N/A
3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUL-22

VAPNEK, EVAN, MD†
Provider ID: N/A
3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Effective as of 01-SEP-21

VAPNEK, EVAN, MD†
Provider ID: N/A
3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
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VAPNEK, EVAN, MD†
Provider ID: N/A
3444 KEARNY VILLA RD
STE 202
SAN DIEGO, CA 92123
Effective as of 01-JUN-21

WANG, LUKE, MD
Provider ID: N/A
200 W ARBOR DR
SAN DIEGO, CA 92103
Effective as of 01-JUN-23

YUH, BENJAMIN, MD†

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A

3444 KEARNY VILLA RD  
STE 201  
SAN DIEGO, CA 92123  
Effective as of 01-JAN-24

YUH, BENJAMIN, MD†
Provider ID: N/A

11770 BERNARDO PLAZA CT STE 270  
SAN DIEGO, CA 92128  
Effective as of 01-JAN-24

ADDICTIVE MEDICINE

NACFY, K, MD†
Provider ID: N/A

30448 RANCHO VIEJO RD  
STE 150  
SAN JUAN CAPISTRANO,  
CA 92675  
Teleservice  
Effective as of 01-MAY-21

CLINICAL NEUROPSYCHOLOGIST

HOCHBERGER, WILLIAM, PhD
Provider ID: N/A

29122 RANCHO VIEJO RD  
STE 102G  
SAN JUAN CAPISTRANO,  
CA 92675  
Effective as of 01-APR-24

HOCHBERGER, WILLIAM, PhD
Provider ID: N/A

29122 RANCHO VIEJO RD  
STE 102G  
SAN JUAN CAPISTRANO,  
CA 92675  
Effective as of 01-APR-24

KALINIAN, HAYGOUHSH, PhD
Provider ID: N/A

30320 RANCHO VIEJO RD  
STE 102  
SAN JUAN CAPISTRANO,  
CA 92675  
Effective as of 01-AUG-23

LEWIS, GEORGE, MD
Provider ID: N/A

31001 RANCHO VIEJO RD  
STE 200  
SAN JUAN CAPISTRANO,  
CA 92675  
Effective as of 01-AUG-23

OBZEJTA, NATALIA, MD†
Provider ID: N/A

31001 RANCHO VIEJO RD  
STE 200  
SAN JUAN CAPISTRANO,  
CA 92675  
Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†
Provider ID: N/A

31001 RANCHO VIEJO RD  
STE 200  
SAN JUAN CAPISTRANO,  
CA 92675  
Effective as of 01-APR-22

OBZEJTA, NATALIA, MD†
Provider ID: N/A

31001 RANCHO VIEJO RD  
STE 200  
SAN JUAN CAPISTRANO,  
CA 92675  
Effective as of 01-APR-22

PETRERSON, TYLER, DO
Provider ID: N/A

31001 RANCHO VIEJO RD  
STE 200  
SAN JUAN CAPISTRANO,  
CA 92675  
Effective as of 01-OCT-23

PETRERSON, TYLER, DO

700
C1. 網絡內提供者清單
專科護理醫師

<table>
<thead>
<tr>
<th>Provider ID: N/A</th>
<th>31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-OCT-23</th>
</tr>
</thead>
<tbody>
<tr>
<td>PETERSON, TYLER, DO</td>
<td>Provider ID: N/A 31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-OCT-23</td>
</tr>
<tr>
<td>RAD, SHERVIN, MD</td>
<td>Provider ID: N/A 31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-JAN-24</td>
</tr>
<tr>
<td>TAKHAR, JASMINE, DO</td>
<td>Provider ID: N/A 31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-DEC-23</td>
</tr>
<tr>
<td>TAKHAR, JASMINE, DO</td>
<td>Provider ID: N/A 31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-DEC-23</td>
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<tr>
<td>INTERNAL MEDICINE</td>
<td>CARABULEA, GABRIEL, MD Provider ID: N/A 30250 RANCHO VIEJO RD STE C SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-JAN-24</td>
</tr>
<tr>
<td>INTERNAL MEDICINE</td>
<td>CARABULEA, GABRIEL, MD Provider ID: N/A 30250 RANCHO VIEJO RD STE C SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-MAY-23</td>
</tr>
<tr>
<td>RAD, SHERVIN, MD</td>
<td>Provider ID: N/A 31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-JAN-24</td>
</tr>
<tr>
<td>RAD, SHERVIN, MD</td>
<td>Provider ID: N/A 31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-JAN-24</td>
</tr>
<tr>
<td>TAKHAR, JASMINE, DO</td>
<td>Provider ID: N/A 31001 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-SEP-19</td>
</tr>
<tr>
<td>KOHLI, SANJIVAN, MD</td>
<td>Provider ID: N/A 30230 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-OCT-20</td>
</tr>
<tr>
<td>KOHLI, SANJIVAN, MD</td>
<td>Provider ID: N/A 30230 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-OCT-20</td>
</tr>
<tr>
<td>KOHLI, SANJIVAN, MD</td>
<td>Provider ID: N/A 30230 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-NOV-22</td>
</tr>
<tr>
<td>KOHLI, SANJIVAN, MD</td>
<td>Provider ID: N/A 30230 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-NOV-22</td>
</tr>
<tr>
<td>INTERNAL MEDICINE CRITICAL CARE MEDICINE</td>
<td>KALE, RAHUL, MD Provider ID: N/A 30230 RANCHO VIEJO RD STE 200 SAN JUAN CAPISTRANO, CA 92675 Effective as of 01-NOV-22</td>
</tr>
</tbody>
</table>
C1. 網絡內提供者清單

專科護理醫師

KALE, RAHUL, MD†
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-OCT-20

KOHLI, SANJIVAN, MD†
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-SEP-19

REZVAN, KAVEH, DO†
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-20

Nephrology

LEE, BRIAN, MD†
Provider ID: N/A
31001 RANCHO VIEJO RD
STE 100A
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JUN-22

PANG, JASON, MD†
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-DEC-14

OPHTHALMOLOGY

KIM, ESTHER, MD
Provider ID: N/A
31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-DEC-23

Williams, Mark, MD
Provider ID: N/A
31451 RANCHO VIEJO RD
STE 101
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-DEC-23
C1. 網絡內提供者清單
專科護理醫師

WILLIAMS, MARK, MD
Provider ID: N/A
31451 RANCHO VIEJO RD
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-DEC-23

PODIATRIST

ANGAROLA, JEFF, DPM
Provider ID: N/A
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-JAN-22

ANGAROLA, JEFF, DPM
Provider ID: N/A
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-JAN-22

PSYCHIATRY

KURKJIAN, AZAD, MD
Provider ID: N/A
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-MAY-18

PSYCHIATRY CHILD

KURKJIAN, AZAD, MD
Provider ID: N/A
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-MAY-18

KURKJIAN, AZAD, MD
Provider ID: N/A
31001 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-MAY-18

PSYCHOLOGIST

HANSINK, RAYMOND, PhD
Provider ID: N/A
30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-DEC-20

HANSINK, RAYMOND, PhD
Provider ID: N/A
30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-23

HANSINK, RAYMOND, PhD
Provider ID: N/A
30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-23

HANSINK, RAYMOND, PhD
Provider ID: N/A
30290 RANCHO VIEJO RD
STE 104
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-23
C1. 網絡內提供者清單
専科護理醫師

SEIDER, TALIA, PhD
Provider ID: N/A
29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-APR-24

SEIDER, TALIA, PhD
Provider ID: N/A
29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-APR-24

SEIDER, TALIA, PhD
Provider ID: N/A
29122 RANCHO VIEJO RD
STE 102G
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-APR-24

PULMONARY DISEASES

KALE, RAHUL, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JUN-17

KOHLI, SANJIVAN, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-18

KOHLI, SANJIVAN, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JAN-20

KOHLI, SANJIVAN, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Effective as of 01-JUN-17

PATEL, JAY, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Teleservice
Effective as of 01-DEC-22

PATEL, JAY, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Teleservice
Effective as of 01-NOV-22

PATEL, JAY, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Teleservice
Effective as of 01-NOV-22

PATEL, JAY, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Teleservice
Effective as of 01-JUN-23

PATEL, JAY, MD‡
Provider ID: N/A
30230 RANCHO VIEJO RD
STE 200
SAN JUAN CAPISTRANO,
CA 92675
Teleservice
Effective as of 01-DEC-22
Effective as of 01-OCT-22

REZVAN, KAVEH, DO
Provider ID: N/A
30230 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-OCT-20

REZVAN, KAVEH, DO
Provider ID: N/A
30230 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-18

SOONG, YEN-HUI, MD
Provider ID: N/A
30230 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-18

SOONG, YEN-HUI, MD
Provider ID: N/A
30230 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-DEC-20

SOONG, YEN-HUI, MD
Provider ID: N/A
30230 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-OCT-22

SOONG, YEN-HUI, MD
Provider ID: N/A
30230 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-JUL-21

SOONG, YEN-HUI, MD
Provider ID: N/A
30230 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-OCT-16

SOONG, YEN-HUI, MD
Provider ID: N/A
30230 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-MAY-21

YEAM, INCHEL, MD
Provider ID: N/A
31001 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-OCT-23

YEAM, INCHEL, MD
Provider ID: N/A
31001 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-DEC-23

YEAM, INCHEL, MD
Provider ID: N/A
31001 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-21

Surgery Hand

SOHN, ROGER, MD
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-JUL-21

SOHN, ROGER, MD
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-SEP-20

Surgery Orthopedic

GVOZDYEV, BORYS, MD
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-JUL-21

GVOZDYEV, BORYS, MD
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-JAN-23
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-OCT-23

GVOZDYEV, BORYS, MD†
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-20

GVOZDYEV, BORYS, MD†
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-AUG-20

HUO, KEUN-HENG, MD†
Provider ID: N/A
31920 DEL OBISPO ST STE 92675
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-OCT-23

KIM-ORDEN, MICHAEL, MD
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-OCT-23

KIM-ORDEN, MICHAEL, MD
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-SEP-21

LEE, RICHARD, MD
Provider ID: N/A
30230 RANCHO VIEJO RD STE 200
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-JAN-23

SOHN, ROGER, MD†
Provider ID: N/A
31920 DEL OBISPO ST STE 170
SAN JUAN CAPISTRANO, CA 92675
Effective as of 01-SEP-21

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

Sohn, Roger, MD†
Provider ID: N/A
31920 Del Obispo St Ste 170
San Juan Capistrano, CA 92675
Effective as of 01-Feb-20

Sohn, Roger, MD†
Provider ID: N/A
31920 Del Obispo St Ste 170
San Juan Capistrano, CA 92675
Effective as of 01-Sep-21

Sohn, Roger, MD†
Provider ID: N/A
31920 Del Obispo St Ste 170
San Juan Capistrano, CA 92675
Effective as of 01-Oct-23

CARDIAC ELECTROPHYSIOLOGY

Lerner, Jonathan, MD
Provider ID: N/A
955 Boardwalk Ste 100
San Marcos, CA 92078
Effective as of 01-Jul-23

Shah, Abhishek, MD†
Provider ID: N/A
955 Boardwalk Ste 100
San Marcos, CA 92078
Effective as of 01-Jan-23

CARDIOVASCULAR DISEASE

Carlson, Steven, MD†
Provider ID: N/A
955 Boardwalk Ste 100
San Marcos, CA 92078
Effective as of 01-Apr-21

Parikh, Milind, DO†
Provider ID: N/A
955 Boardwalk Ste 100
San Marcos, CA 92078
Effective as of 01-Sep-22

Sarsam, Luay, MD
Provider ID: N/A
955 Boardwalk Ste 100
San Marcos, CA 92078
Effective as of 01-Jul-23

Sarsam, Luay, MD
Provider ID: N/A
C1. 網絡內提供者清單

網絡內提供者清單

專科護理醫師

SHAH, KULIN, MD†
Provider ID: N/A
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JUL-23

SHAH, ABHISHEK, MD†
Provider ID: N/A
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23

SUDHAKAR, DEEPTHI, MD†
Provider ID: N/A
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Effective as of 01-JAN-23

CERTIFIED
ACUPUNCTURIST

GONZALEZ, ANDRES, LAC
Provider ID: N/A
1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Effective as of 01-MAY-23

CERTIFIED NURSE
PRACTITIONER

ANDREW, SHIRLEY, NP†
Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-SEP-22

FAIQ, JAMILA, NP†
Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JAN-21

FAIQ, JAMILA, NP†
Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUL-21

MOONEY, PATRICIA, NP†
Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAY-21

MWAURA, WAIRIMU, NP†
Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-SEP-22

MWAURA, WAIRIMU, NP†
Provider ID: N/A
838 NORDAHL RD STE 300
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-JUN-21

PARSONS, MEKRAE, NP
Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-DEC-23

VAHDAT, VALERIE, NP†
Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-NOV-22

VICK, ALINA, NP
Provider ID: N/A
314 S TWIN OAKS VALLEY RD STE 114
SAN MARCOS, CA 92078

Your PCP's provider network may have Networked Mental Health Service Providers. Please refer to the list below. You may contact these providers directly. Please note, some services may require prior authorization from the Networked Mental Health Service Provider before they can be covered.

To online access the Networked Mental Health Service Provider list, visit blueshieldca.com/fad.
C1. 網絡內提供者清單

【专科護理醫師】

**Teleservice**

- **Effective as of 01-NOV-23**
- **WILLEY, MARTI, NP**
  - Provider ID: N/A
  - 838 NORDAHL RD STE 300
  - SAN MARCOS, CA 92069
  - Effective as of 01-JUL-22

**Certified Registered Nurse Midwife**

- **BELANGER, TANYA, CRNM**
  - Provider ID: N/A
  - 150 VALPREDA RD
  - SAN MARCOS, CA 92069
  - Effective as of 01-JUL-22

- **MATEO, MARIE, CRNM**
  - Provider ID: N/A
  - 150 VALPREDA RD
  - SAN MARCOS, CA 92069
  - Effective as of 01-JUL-22

**Chiropractor**

- **HINES, TAYTE, DC**
  - Provider ID: N/A
  - 2085 MONTIEL RD STE 102
  - SAN MARCOS, CA 92069
  - Effective as of 01-JAN-24

- **JEPPSESEN, LANCE, DC**
  - Provider ID: N/A
  - 1146 SAN MARINO DR STE L
  - SAN MARCOS, CA 92078
  - Effective as of 01-JAN-21

- **MAUSER, JILL ELLEN, DC**
  - Provider ID: N/A
  - 1146 SAN MARINO DR
  - SAN MARCOS, CA 92078
  - Effective as of 01-JUN-21

**Dermatology**

- **ANGRA, KUNAL, MD**
  - Provider ID: N/A
  - 838 NORDAHL RD STE 250
  - SAN MARCOS, CA 92069
  - Effective as of 01-DEC-21

- **GILBOA, RUTH, MD**
  - Provider ID: N/A
  - 838 NORDAHL RD STE 250
  - SAN MARCOS, CA 92069
  - Effective as of 01-AUG-21

- **SIRICHOTIRATANA, MELISSA, MD**
  - Provider ID: N/A
  - 838 NORDAHL RD STE 250
  - SAN MARCOS, CA 92069
  - Effective as of 01-JAN-23

- **VENKAT, ARUN, MD**
  - Provider ID: N/A
  - 838 NORDAHL RD STE 250
  - SAN MARCOS, CA 92069
  - Effective as of 01-JUL-22

- **VENKAT, ARUN, MD**
  - Provider ID: N/A
  - 838 NORDAHL RD STE 250
  - SAN MARCOS, CA 92069
  - Effective as of 01-SEP-22

**Family Practice**

- **NATH, DEVARSHI, MD**
  - Provider ID: N/A
  - 1595 GRAND AVE STE 106
  - SAN MARCOS, CA 92078
  - Effective as of 01-FEB-23

**Hematology / Oncology**

- **BESSUDO, ALBERTO, MD**
  - Provider ID: N/A
  - 838 NORDAHL RD STE 300
  - SAN MARCOS, CA 92069
  - Teleservice
  - Effective as of 01-NOV-21

- **BESSUDO, ALBERTO, MD**
  - Provider ID: N/A
  - 838 NORDAHL RD STE 300
  - SAN MARCOS, CA 92069
  - Teleservice
  - Effective as of 01-JAN-21

- **KOSMO, MICHAEL, MD**
  - Provider ID: N/A
  - 838 NORDAHL RD STE 300
  - SAN MARCOS, CA 92069
  - Teleservice
  - Effective as of 01-JAN-21
C1. 網絡內提供者清單

**網絡內提供者清單**

**專科護理醫師**

- **MARJON, PHILIP, MD**
  Provider ID: N/A
  838 NORDAHL RD STE 300
  SAN MARCOS, CA 92069
  Teleservice
  Effective as of 01-APR-24

- **SINCLAIR, JAMES, MD**
  Provider ID: N/A
  838 NORDAHL RD STE 300
  SAN MARCOS, CA 92069
  Effective as of 01-APR-24

- **SULLIVAN, JESSICA, DO**
  Provider ID: N/A
  838 NORDAHL RD STE 300
  SAN MARCOS, CA 92069
  Effective as of 01-APR-24

** INTERNAL MEDICINE **

- **NARAYANAN, MEENA, MD**
  Provider ID: N/A
  955 BOARDWALK STE 100
  SAN MARCOS, CA 92078
  Effective as of 01-APR-23

- **PONIACHIK, SAMUEL, MD**
  Provider ID: N/A
  1595 GRAND AVE STE 100
  SAN MARCOS, CA 92078
  Effective as of 01-JUN-23

** INTERVENTIONAL CARDIOLOGY **

- **DO, HULBERT, MD**
  Provider ID: N/A
  150 VALPREDA RD
  SAN MARCOS, CA 92069
  Effective as of 01-AUG-22

- **JOHN, ALAN, MD**
  Provider ID: N/A
  955 BOARDWALK STE 100
  SAN MARCOS, CA 92078
  Effective as of 01-MAY-23

** LICENSED CLINICAL SOCIAL WORKER **

- **MARTINEZ, NORAYMA, LCSW**
  Provider ID: N/A
  1510 E MISSION RD STE RV035
  SAN MARCOS, CA 92069
  Effective as of 01-NOV-22

** MEDICAL ONCOLOGY **

- **FRAKES, LAURIE, MD**
  Provider ID: N/A
  838 NORDAHL RD STE 300
  SAN MARCOS, CA 92069
  Effective as of 01-OCT-22

** NEPHROLOGY **

- **AFSHAR, MASOUD, MD**
  Provider ID: N/A
  960 W SAN MARCOS BLVD STE 210
  SAN MARCOS, CA 92078
  Teleservice
  Effective as of 01-OCT-22
C1. 網絡內提供者清單

專科護理醫師

Provider ID: N/A
960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-MAY-22

KAYAL, ANAS, MD†
Provider ID: N/A
960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-MAY-22

KAYAL, ANAS, MD†
Provider ID: N/A
960 W SAN MARCOS BLVD
STE 210
SAN MARCOS, CA 92078
Effective as of 01-OCT-23

NEUROLOGY

ANDER, AZIZ, MD†
Provider ID: N/A
838 NORDAHL RD STE 310
SAN MARCOS, CA 92069
Effective as of 01-NOV-21

ANDER, AZIZ, MD†
Provider ID: N/A
838 NORDAHL RD STE 310
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

FARHIDVASH, FARIBA, MD†
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-DEC-22

GRATIANNE, ROBERTO, MD†
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069

Effectively as of 01-JUN-22

GUPTA, MONIKA, MD†
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

HOSSEIN ZADEH MALEKI,
ANA, MD
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

HOSSEIN ZADEH MALEKI,
ANA, MD
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-OCT-23

HUISA-GARATE, BRANKO, MD†
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-SEP-22

KAYAL, ANAS, MD†
Provider ID: N/A
334 VIA VERA CRUZ STE 251
SAN MARCOS, CA 92078
Teleservice
Effective as of 01-SEP-22

MAREK, MAKSYM, MD
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-OCT-23

MAREK, MAKSYM, MD
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-MAR-24

MCGEHRIN, KEVIN, MD
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

OLENSKI, KLARI, DO‡
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

PHAM, ALISE, DO
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

PHAM, ALISE, DO
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

711
Teleservice
Effective as of 01-MAR-24

SILVER, BRENT, MD†
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-DEC-22

SORIA LOPEZ, JOSE, MD†
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JUN-22

WU, MELANIE, DO†
Provider ID: N/A
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Effective as of 01-JAN-23

OBSTETRICS / GYNECOLOGY

CIZMAR, BRANISLAV, MD
Provider ID: N/A
120 CRAVEN RD STE 101
SAN MARCOS, CA 92078
Effective as of 01-JAN-24

POUNTNEY, MARLENE, MD†
Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

POUNTNEY, MARLENE, MD†
Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

OPHTHALMOLOGY

GARFF, KEVIN, MD†
Provider ID: N/A
100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-MAR-24

GUAN, HOWARD, MD
Provider ID: N/A
100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-FEB-24

PRESTERA, TORY, MD†
Provider ID: N/A
100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-JAN-21

PRESTERA, TORY, MD†
Provider ID: N/A
100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069
Effective as of 01-JUL-22

PEDIATRICS

LUM HO, RACHEL, MD
Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-MAR-23

QUINTERO, CAROLYN, MD
Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

PODIATRIST

150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

PHYSICIANS ASSISTANT

BASIN, NATALIE, PA
Provider ID: N/A
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-AUG-23

BECKER, JANTIMA, PA
Provider ID: N/A
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Teleservice
Effective as of 01-APR-24

BERNARDO, RACHELLE, PA
Provider ID: N/A
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Effective as of 01-FEB-23

ESCALANTE, JUVY, PA
Provider ID: N/A
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Effective as of 01-FEB-23

POLLEY, SHANNON, PA
Provider ID: N/A
150 VALPREDA RD
SAN MARCOS, CA 92069
Effective as of 01-NOV-23

SERING, MALIA, PA†
Provider ID: N/A
838 NORDAHL RD STE 250
SAN MARCOS, CA 92069
Effective as of 01-SEP-22
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<td>2085 MONTIEL RD STE 102 SAN MARCOS, CA 92069</td>
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<td>AL NAHLAWI, BASMA, MD</td>
<td>MD†</td>
<td>334 VIA VERA CRUZ STE 251 SAN MARCOS, CA 92078</td>
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**PSYCHIATRY**

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**PSYCHOLOGIST**

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<td>CARLTON PENN, CORNELIA, PhD</td>
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<td>1510 E MISSION RD SPC RV035 SAN MARCOS, CA 92069</td>
<td>01-NOV-22</td>
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<td>CARLTON PENN, CORNELIA, PhD</td>
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<td>1510 E MISSION RD SPC RV035 SAN MARCOS, CA 92069</td>
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**RHEUMATOLOGY**

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<td>AL NAHLAWI, BASMA, MD</td>
<td>MD†</td>
<td>334 VIA VERA CRUZ STE 251 SAN MARCOS, CA 92078</td>
<td>01-JUL-22</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
| Provider ID: N/A                          | 960 W SAN MARCOS BLVD STE 210  
SAN MARCOS, CA 92078 | Effective as of 01-MAY-22 |
|-----------------------------------------|-----------------------------|--------------------------|
| AL NAHLAWI, BASMA, MD†                  | 960 W SAN MARCOS BLVD STE 210  
SAN MARCOS, CA 92078 | Effective as of 01-OCT-23 |
| AL NAHLAWI, BASMA, MD†                  | 334 VIA VERA CRUZ STE 251  
SAN MARCOS, CA 92078 | Effective as of 01-OCT-21 |
| AL NAHLAWI, BASMA, MD†                  | 334 VIA VERA CRUZ STE 251  
SAN MARCOS, CA 92078 | Effective as of 01-SEP-22 |
| DIKRANIAN, ARA, MD                      | 960 W SAN MARCOS BLVD STE 210  
SAN MARCOS, CA 92078 | Effective as of 01-MAR-24 |
| AIZIN, VITALI, MD†                       | 4630 BORDER VILLAGE RD STE H  
SAN YSIDRO, CA 92173 | Effective as of 01-FEB-21 |
| AIZIN, VITALI, MD†                       | 4630 BORDER VILLAGE RD STE H  
SAN YSIDRO, CA 92173 | Effective as of 01-DEC-21 |
| CELIZ, ADRIANA, NP†                     | 3364 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-DEC-22 |
| CELIZ, ADRIANA, NP†                     | 4004 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-APR-23 |
| HACINAS, REYNALDO, NP†                  | 4004 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-APR-23 |
| KANTAS, PARIS, NP†                      | 4004 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-MAY-22 |
| LIEBER, CAROL, NP†                      | 1601 PRECISION PARK LN  
SAN YSIDRO, CA 92173 | Effective as of 01-JAN-21 |

**FAMILY PRACTICE**

| Provider ID: N/A                          | 4050 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-APR-23 |
|-----------------------------------------|-----------------------------|--------------------------|
| ALVAREZ-ESTRADA, MIGUEL, MD†             | 4004 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-APR-23 |
| ARRIETA, NOEMI, DO                      | 4004 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-APR-23 |
| CORONADO, MYRNA, MD†                     | 4004 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-APR-23 |
| CORONADO, MYRNA, MD                       | 4050 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-APR-23 |
| DALUGDUGAN, ESTHER, MD                   | 4004 BEYER BLVD  
SAN YSIDRO, CA 92173 | Effective as of 01-APR-23 |
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<td>ESTRADA, JOHANNA, MD</td>
<td>4004 BEYER BLVD, SAN YSIDRO, CA 92173</td>
<td>01-NOV-23</td>
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<td>ROJAS, STEVEN, MD</td>
<td>4004 BEYER BLVD, SAN YSIDRO, CA 92173</td>
<td>01-MAY-23</td>
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<td>STALEY, MICHAELA, MD</td>
<td>4004 BEYER BLVD, SAN YSIDRO, CA 92173</td>
<td>01-NOV-23</td>
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<td>VAN PRATT LEVIN, AISHA, MD</td>
<td>4004 BEYER BLVD, SAN YSIDRO, CA 92173</td>
<td>01-JAN-24</td>
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<td>ALVAREZ, IRAIDA, MFT</td>
<td>1666 PRECISION PARK LN, SAN YSIDRO, CA 92173</td>
<td>01-DEC-22</td>
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<td>BALTRUS, JUSTINE, MFT</td>
<td>1666 PRECISION PARK LN, SAN YSIDRO, CA 92173</td>
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<td>BURCIAGA, HENRY, MFT</td>
<td>1666 PRECISION PARK LN, SAN YSIDRO, CA 92173</td>
<td>01-OCT-22</td>
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<td>JIMENEZ, NANCY, MFT</td>
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<td>01-FEB-24</td>
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<td>LAD, NIKISHA, LCSW</td>
<td>1666 PRECISION PARK LN, SAN YSIDRO, CA 92173</td>
<td>01-APR-24</td>
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<td>LOPEZ, MARIBEL, LCSW</td>
<td>1666 PRECISION PARK LN, SAN YSIDRO, CA 92173</td>
<td>01-OCT-22</td>
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</table>
C1. 網絡內提供者清單
專科護理醫師

**NEONATAL / PERINATAL MEDICINE**

GOMEZ, DANIELA, MD
Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-OCT-22

DANESHMAND, SHAHرام, MD†
Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-SEP-21

**NEPHROLOGY**

SOLTERO, RICARDO, MD†
Provider ID: N/A

4004 BEYER BLVD STE 400
SAN YSIDRO, CA 92173
Teleservice
Effective as of 01-OCT-22

**OBSTETRICS / GYNECOLOGY**

BERGGREN, ERICA, MD†
Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-SEP-21

CARR, MIANDA, MD†
Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

**OCPPHTHALMOLOGY**

DE SILVA, NIHAL, MD†
Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

**PEDIATRICS**

DILLON, BENEDICT, MD†
Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

TAYLOR, TASHA, MD†
Provider ID: N/A

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JUL-22

**PHYSICIANS ASSISTANT**

BUCKNER, JOSEPH, PA
Provider ID: N/A

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-FEB-22

HARMIS, NATASHA, PA†
Provider ID: N/A

3364 BEYER BLVD STE 102
SAN YSIDRO, CA 92173
Teleservice
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<tr>
<td>MARTINEZ MURGUIA, IRENE, PA</td>
<td>Provider ID: N/A</td>
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<td>PORTO MADURSKI, KRISTINE, PA</td>
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<td>ROSENBLATT, SHERI, PA†</td>
<td>Provider ID: N/A</td>
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<td>SMITH, DOUGLAS, PA†</td>
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<td>SUNA SITTO, MOHEEN, PA†</td>
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<td>MANCHEL, BRUCE, DPM†</td>
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<td>4005 BEYER BLVD SAN YSIDRO, CA 92173</td>
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<tr>
<td>CRAWFORD-DAY, ANN, MD</td>
<td>Provider ID: N/A</td>
<td>4004 BEYER BLVD SAN YSIDRO, CA 92173</td>
<td>Effective as of 01-APR-23</td>
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<tr>
<td>CRAWFORD-DAY, ANN, MD</td>
<td>Provider ID: N/A</td>
<td>4004 BEYER BLVD SAN YSIDRO, CA 92173</td>
<td>Effective as of 01-APR-23</td>
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<tr>
<td>FONTANA, LOUIS, MD†</td>
<td>Provider ID: N/A</td>
<td>4004 BEYER BLVD SAN YSIDRO, CA 92173</td>
<td>Effective as of 01-APR-23</td>
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<tr>
<td>FONTANA, LOUIS, MD†</td>
<td>Provider ID: N/A</td>
<td>4004 BEYER BLVD SAN YSIDRO, CA 92173</td>
<td>Effective as of 01-APR-23</td>
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<tr>
<td>JAMES, CHRISTINE, DO</td>
<td>Provider ID: N/A</td>
<td>1666 PRECISION PARK LN SAN YSIDRO, CA 92173</td>
<td>Effective as of 01-FEB-24</td>
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<tr>
<td>OJHA, PRITI, MD</td>
<td>Provider ID: N/A</td>
<td>1666 PRECISION PARK LN SAN YSIDRO, CA 92173</td>
<td>Effective as of 01-JUN-23</td>
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<td>OJHA, PRITI, MD</td>
<td>Provider ID: N/A</td>
<td>1666 PRECISION PARK LN SAN YSIDRO, CA 92173</td>
<td>Effective as of 01-JUN-23</td>
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<tr>
<td>HILL, CARLA, SP†</td>
<td>Provider ID: N/A</td>
<td>3364 BEYER BLVD SAN YSIDRO, CA 92173</td>
<td>Teleservice Effective as of 01-FEB-21</td>
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<tr>
<td>ROSENFIELD, ALAN, MD†</td>
<td>Provider ID: N/A</td>
<td>4004 BEYER BLVD SAN YSIDRO, CA 92173</td>
<td>Effective as of 01-JAN-21</td>
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</table>
C1. 網絡內提供者清單

**UROLOGY**

SALEM, CAROL, MD†
Provider ID: N/A

3004 BEYER BLVD
SAN YSIDRO, CA 92173
Effective as of 01-JAN-21

**CHIROPRACTOR**

KELCHNER, MATTHEW, DC†
Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-DEC-22

**GASTROENTEROLOGY**

REDDY, ANANTHRAM, MD†
Provider ID: N/A

9456 CUYAMACA ST STE 102
SANTEE, CA 92071
Effective as of 01-JAN-21

**INTERNAL MEDICINE**

CORBIN, DAVID, MD†
Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-NOV-23

**LICENSED CLINICAL SOCIAL WORKER**

MEAGHER, RAISHELLE, LCSW

Provider ID: N/A

VENKATESH, VIJAY, MD†
Provider ID: N/A

9640 MISSION GORGE RD STE H
SANTEE, CA 92071
Effective as of 01-SEP-22

**PEDIATRICS**

IKE, ERICA, DO†
Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Effective as of 01-JAN-21

**PHYSICIANS ASSISTANT**

ROSENBLATT, SHERI, PA†
Provider ID: N/A

120 TOWN CENTER PKWY
SANTEE, CA 92071
Teleservice
Effective as of 01-OCT-21

**PSYCHIATRY**

CHAUDHRI, YASHWANT, MD†
Provider ID: N/A

8770 CUYAMACA ST STE 4
SANTEE, CA 92071
Effective as of 01-MAY-22

**DERMATOLOGY**

AGUIRRE, KRISTEN, MD†
Provider ID: N/A

530 LOMAS SANTA FE DR STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

**RADIOLOGY DIAGNOSTIC**

MOORE, BRIAN, MD†
Provider ID: N/A

9640 MISSION GORGE RD STE H
SANTEE, CA 92071
Effective as of 01-JAN-21

GILBOA, RUTH, MD†
Provider ID: N/A

530 LOMAS SANTA FE DR STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22
C1. 網絡內提供者清單

專科護理醫師

GILBOA, RUTH, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

GILBOA, RUTH, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-FEB-21

GILBOA, RUTH, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-AUG-08

ROSS, ANDREW, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-AUG-20

ROSS, ANDREW, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-SEP-22

ROSS, ANDREW, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

ROSS, ANDREW, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

SIRICHOTIRATANA, MELISSA, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUN-22

THIELE, JENS, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JAN-23

THIELE, JENS, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

TSE, YARDY, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-SEP-09

VENKAT, ARUN, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-MAR-16

VENKAT, ARUN, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-SEP-22

VENKAT, ARUN, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE D
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ENDOCRINOLOGY
METABOLISM DIABETES

ARGOUD, GEORGES, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

ARGOUD, GEORGES, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR
STE 8
SOLANA BEACH, CA 92075
Effective as of 01-MAR-15

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單

網絡內提供者清單

ARGOUD, GEORGES, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

ARGOUD, GEORGES, MD†
Provider ID: N/A
530 LOMAS SANTA FE DR STE 8
SOLANA BEACH, CA 92075
Effective as of 01-JUL-22

PHYSICIANS ASSISTANT

BOYDSTON, EMILY, PA
Provider ID: N/A
380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Teleservice
Effective as of 01-APR-24

GIBSON, JULIA, PA
Provider ID: N/A
380 STEVENS AVE STE 310
SOLANA BEACH, CA 92075
Effective as of 01-MAY-23

LEE, MYUNGHEE, PA
Provider ID: N/A
530 LOMAS SANTA FE DR STE 8
SOLANA BEACH, CA 92075
Teleservice

DISEASE

AGGARWAL, SAURABH, MD†
Provider ID: N/A
26962 CHERRY HILLS BLVD STE A
SUN CITY, CA 92586
Effective as of 01-DEC-21

SARSAM, SINAN, MD†
Provider ID: N/A
26960 CHERRY HILLS BLVD STE A
SUN CITY, CA 92586
Effective as of 01-JUN-21

CERTIFIED NURSE PRACTITIONER

CISTRONE, MONICA, NPF
Provider ID: N/A
9239 CAMPO RD STE A
SPRING VALLEY, CA 91977
Teleservice
Effective as of 01-JUL-23

GORDON, DANIELLE, NP†
Provider ID: N/A
9239 CAMPO RD STE A
SPRING VALLEY, CA 91977
Teleservice
Effective as of 01-MAR-22

ALLERGY IMMUNOLOGY

BROWN, HOSEA, MD†
Provider ID: N/A
26960 CHERRY HILLS BLVD STE D
SUN CITY, CA 92586
Effective as of 01-FEB-22

GASTROENTEROLOGY

RAGHUWANSHI, NAISHADH, MD†
Provider ID: N/A
26960 CHERRY HILLS BLVD STE D
SUN CITY, CA 92586
Effective as of 01-FEB-22

AUDIOLOGIST

ACEVEDO-FREY, SYLVIA, AuD
Provider ID: N/A
28071 BRADLEY RD
SUN CITY, CA 92586
Effective as of 01-JUN-23

CARDIOVASCULAR
C1. 網絡內提供者清單

專科護理醫師

**MARRIAGE FAMILY THERAPIST**

PORTER, TERRY, MFT

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586
Effective as of 01-JAN-23

PORTER, TERRY, MFT

Provider ID: N/A

28125 BRADLEY RD STE 220
SUN CITY, CA 92586
Effective as of 01-JAN-23

**NEPHROLOGY**

ISHAK, SALAM, MD

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586
Effective as of 01-SEP-12

ISHAK, SALAM, MD

Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586
Effective as of 01-JUN-12

**OPHTHALMOLOGY**

JACOBSON, ARTHUR, MD

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586
Effective as of 01-JUL-23

LEE, JOHN, MD

Provider ID: N/A

28125 BRADLEY RD STE 189
SUN CITY, CA 92586
Effective as of 01-FEB-11

**OPTOMETRIST**

LANE, KEVIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586
Effective as of 01-JUL-23

GUPTA, SAMEER, MD

Provider ID: N/A

41715 WINCHESTER RD STE 206
TEMECULA, CA 92590
Effective as of 01-JUL-23

**RADIOLOGY DIAGNOSTIC**

BURROUGHS, GLORIA, MD

Provider ID: N/A

26870 CHERRY HILLS BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD

Provider ID: N/A

26870 CHERRY HILLS BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD

Provider ID: N/A

26870 CHERRY HILLS BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

**ANESTHESIOLOGY**

DORAISWAMY, ARUL, MD

Provider ID: N/A

28975 OLD TOWN FRONT ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

DORAISWAMY, ARUL, MD

Provider ID: N/A

28975 OLD TOWN FRONT ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

**ALLERGY IMMUNOLOGY**

GUPTA, SAMEER, MD

Provider ID: N/A

41715 WINCHESTER RD STE 206
TEMECULA, CA 92590
Effective as of 01-DEC-21

GUPTA, SAMEER, MD

Provider ID: N/A

41715 WINCHESTER RD STE 206
TEMECULA, CA 92590
Effective as of 01-FEB-15

**NEPHROLOGY**

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Provider ID: N/A

28125 BRADLEY RD STE 270
SUN CITY, CA 92586
Effective as of 01-SEP-12

ISHAK, SALAM, MD

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28125 BRADLEY RD STE 270
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29826 HAUN RD STE 100
SUN CITY, CA 92586
Effective as of 01-JUL-23

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Provider ID: N/A

28125 BRADLEY RD STE 189
SUN CITY, CA 92586
Effective as of 01-FEB-11

**OPTOMETRIST**

LANE, KEVIN, OD

Provider ID: N/A

29826 HAUN RD STE 100
SUN CITY, CA 92586
Effective as of 01-JUL-23

GUPTA, SAMEER, MD

Provider ID: N/A

41715 WINCHESTER RD STE 206
TEMECULA, CA 92590
Effective as of 01-JUL-23

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26870 CHERRY HILLS BLVD
SUN CITY, CA 92586
Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD

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26870 CHERRY HILLS BLVD
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Effective as of 01-OCT-17

BURROUGHS, GLORIA, MD

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26870 CHERRY HILLS BLVD
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Effective as of 01-OCT-17

**ANESTHESIOLOGY**

DORAISWAMY, ARUL, MD

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28975 OLD TOWN FRONT ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

DORAISWAMY, ARUL, MD

Provider ID: N/A

28975 OLD TOWN FRONT ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUL-17

**ALLERGY IMMUNOLOGY**

GUPTA, SAMEER, MD

Provider ID: N/A

41715 WINCHESTER RD STE 206
TEMECULA, CA 92590
Effective as of 01-DEC-21

GUPTA, SAMEER, MD

Provider ID: N/A

41715 WINCHESTER RD STE 206
TEMECULA, CA 92590
Effective as of 01-FEB-15

V欣赏的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
<table>
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<tr>
<th>Provider ID</th>
<th>Name</th>
<th>Specialty</th>
<th>Address</th>
<th>Effective As Of</th>
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<tbody>
<tr>
<td>N/A</td>
<td>KANU, ABDUL, MD</td>
<td>Teleservice</td>
<td>27699 JEFFERSON AVE</td>
<td>01-AUG-20</td>
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<tr>
<td>N/A</td>
<td>PANG, GARY, MD</td>
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<td>27450 YNEZ RD STE 128</td>
<td>01-SEP-23</td>
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<tr>
<td>N/A</td>
<td>CHEN, HAMILTON, MD</td>
<td>ANESTHESIOLOGY PAIN MANAGEMENT</td>
<td>27450 YNEZ RD STE 128</td>
<td>01-SEP-19</td>
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<tr>
<td>N/A</td>
<td>CHEN, HAMILTON, MD†</td>
<td></td>
<td>27450 YNEZ RD STE 202</td>
<td>01-SEP-23</td>
</tr>
<tr>
<td>N/A</td>
<td>CHEN, HAMILTON, MD†</td>
<td></td>
<td>27699 JEFFERSON AVE STE 201</td>
<td>01-JUL-23</td>
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<tr>
<td>N/A</td>
<td>DADACHANJ, CYRUS, MD</td>
<td></td>
<td>27699 JEFFERSON AVE STE 305</td>
<td>01-JUL-23</td>
</tr>
<tr>
<td>N/A</td>
<td>MOELLER-BERTRAM, TOBIAS, MD†</td>
<td></td>
<td>27699 JEFFERSON AVE STE 201</td>
<td>01-MAY-18</td>
</tr>
<tr>
<td>N/A</td>
<td>DORAIWAMY, ARUL, MD†</td>
<td>CARDOVASCULAR DISEASE</td>
<td>28780 SINGLE OAK DR STE 290</td>
<td>01-JAN-22</td>
</tr>
<tr>
<td>N/A</td>
<td>ATTIA, NADER, DO†</td>
<td></td>
<td>31515 RANCHO PUEBLO RD STE 103</td>
<td>01-JUN-23</td>
</tr>
<tr>
<td>N/A</td>
<td>ATTIA, NADER, DO†</td>
<td></td>
<td>31515 RANCHO PUEBLO RD STE 103</td>
<td>01-JUN-23</td>
</tr>
</tbody>
</table>
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-JUL-22

BISWAS, MIMI, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUL-22

COX, JEREMY, DO
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-MAR-24

PAREKH, NIRAJ, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-MAR-24

PAREKH, NIRAJ, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

PAREKH, NIRAJ, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

PAREKH, NIRAJ, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

PATANKAR, KAUSTUBH, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUL-22

WACHNER, KRISTELYN, LAC
Provider ID: N/A
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-OCT-22

SANGODKAR, SANDEEP, DO
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

SARSAM, SINAN, MD
Provider ID: N/A
27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

SARSAM, SINAN, MD
Provider ID: N/A
27450 YNEZ RD STE 109
TEMECULA, CA 92591
Effective as of 01-MAR-22

CERTIFIED NURSE PRACTITIONER

AGORRILLA, MARIA, NP
Provider ID: N/A
44274 GEORGE CUSHMAN CT STE 212
TEMECULA, CA 92592
Effective as of 01-OCT-23

ALVAREZ, ARMANDA, NP
Provider ID: N/A
27555 YNEZ RD STE 102
TEMECULA, CA 92591
Effective as of 01-FEB-24

BEDFORD, RONALD, NP
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

BEDFORD, RONALD, NP
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-SEP-22

WACHNER, KRISTELYN, LAC
Provider ID: N/A
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-OCT-22

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C1. 網絡內提供者清單

專科護理醫師

BEDFORD, RONALD, NP†
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

BEDFORD, RONALD, NP†
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

DONLON, RYAN, NPF
Provider ID: N/A
31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF
Provider ID: N/A
31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF
Provider ID: N/A
31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

DONLON, RYAN, NPF
Provider ID: N/A
31150 TEMECULA PKWY
TEMECULA, CA 92592
Effective as of 01-MAR-24

GEISINGER, TERESA, NP
Provider ID: N/A
31625 DE PORTOLA RD STE 101
TEMECULA, CA 92592
Effective as of 01-APR-23

HARTMAN, JULIE, NPF
Provider ID: N/A
31170 TEMECULA PKWY STE 100
TEMECULA, CA 92592
Effective as of 01-SEP-23

HASAN, BUSHRA, NP
Provider ID: N/A
31170 TEMECULA PKWY STE 100
TEMECULA, CA 92592
Effective as of 01-OCT-22

HLAVAC, SANDRA, NP
Provider ID: N/A
31625 DE PORTOLA RD STE 101
TEMECULA, CA 92592
Effective as of 01-APR-24

HUERTA, CARMEN, NP†
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-22

HUERTA, CARMEN, NP†
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-22

LIRA, SHANNON, NPF
Provider ID: N/A
31625 DE PORTOLA RD STE 101
TEMECULA, CA 92592
Effective as of 01-APR-23

LUCACI, BIANCA, NP
Provider ID: N/A
27555 YNEZ RD STE 400
TEMECULA, CA 92591
Effective as of 01-SEP-22

ONUOHA, NOJA, NP†
Provider ID: N/A
29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-22

ONUOHA, NOJA, NP†
Provider ID: N/A
29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-22

SMITH, PAIGE, NP
Provider ID: N/A
27555 YNEZ RD STE 400
TEMECULA, CA 92591
Effective as of 01-SEP-22

THOMAS, STEPHEN, NPF†
Provider ID: N/A
31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-AUG-22

THOMAS, STEPHEN, NPF†
Provider ID: N/A
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Effective as of 01-SEP-22

THOMAS, STEPHEN, NPF†
Provider ID: N/A
31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-SEP-22

THOMAS, STEPHEN, NPF†
### C1. 網絡內提供者清單

#### 專科護理醫師

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#### 米歇爾，傑西，MD

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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C1. 網絡內提供者清單

網絡內提供者清單

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<td>HADDADIN, HASSAN, MD†</td>
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<td>JACOBS, NATALIA, MD</td>
<td>N/A</td>
<td>40971 WINCHESTER RD</td>
<td>01-MAY-23</td>
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<tr>
<td>WHITE, XUANHA, DO†</td>
<td>N/A</td>
<td>44605 AVENIDA DE MISSIONES STE 206</td>
<td>01-MAY-23</td>
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</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
📅 27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD
Provider ID: N/A
📅 27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

SALEK, MUNIF, MD
Provider ID: N/A
📅 27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-FEB-22

VEGA, RICARDO, MD
Provider ID: N/A
📅 27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-JAN-22

VEGA, RICARDO, MD
Provider ID: N/A
📅 27699 JEFFERSON AVE STE 204
TEMECULA, CA 92590
Effective as of 01-MAR-22

INTERVENTIONAL
CARDIOLOGY

MESSENGER, BRADLEY, MD
Provider ID: N/A
📅 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

PATANKAR, KAUSTUBH, MD
Provider ID: N/A
📅 31515 RANCHO PUEBLO RD STE 103
TEMECULA, CA 92592
Effective as of 01-JUN-23

LCSW

Provider ID: N/A
📅 41840 ENTERPRISE CIR N STE 103
TEMECULA, CA 92590
Effective as of 01-JAN-21

ROBLEDÔ, DAMIAN, LCSW
Provider ID: N/A
📅 41840 ENTERPRISE CIR N STE 103
TEMECULA, CA 92590
Effective as of 01-APR-23

THOMAS, PAULA, LCSW
Provider ID: N/A
📅 41840 ENTERPRISE CIR N STE 103
TEMECULA, CA 92590
Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW
Provider ID: N/A
📅 29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW
Provider ID: N/A
📅 29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

VALDEZ-HERNANDEZ, ISRAEL, LCSW
Provider ID: N/A
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VALDEZ-HERNANDEZ, ISRAEL, LCSW
Provider ID: N/A
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VALDEZ-HERNANDEZ, ISRAEL, LCSW
Provider ID: N/A
📅 29645 RANCHO CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-APR-23

LURINKS GARCIA, MARIA,
C1. 網絡內提供者清單
專科護理醫師

Provider ID: N/A
31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
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NANDI, SHANKHA, DO
Provider ID: N/A
31537 RANCHO PUEBLO RD STE 201
TEMECULA, CA 92592
Effective as of 01-DEC-23

NANDI, SHANKHA, DO
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YAN, ERIC, MD
Provider ID: N/A
31537 RANCHO PUEBLO RD STE 201
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**HUOTT, PATRICK, MD**
Provider ID: N/A
- 31515 RANCHO PUEBLO RD STE 104
  TEMECULA, CA 92592
  Effective as of 01-NOV-22

**GOMEZ, GUILLERMO, MD†**
Provider ID: N/A
- 27625 JEFFERSON AVE STE 101
  TEMECULA, CA 92590
  Effective as of 01-JUL-21

**MAREK, MAKSYM, MD**
Provider ID: N/A
- 44045 MARGARITA RD STE 106
  TEMECULA, CA 92592
  Effective as of 01-DEC-23

**MCGEHRIN, KEVIN, MD**
Provider ID: N/A
- 44045 MARGARITA RD STE 106
  TEMECULA, CA 92592
  Effective as of 01-JUL-23

**NEAL, JAMES, MD†**
Provider ID: N/A
- 31170 TEMECULA PKWY STE 201
  TEMECULA, CA 92592
  Effective as of 01-JUL-23

**RIZVI, SYED, MD†**
Provider ID: N/A
- 31493 RANCHO PUEBLO RD STE 201
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  Effective as of 01-MAR-22

**SILVER, BRENT, MD†**
Provider ID: N/A
- 27625 JEFFERSON AVE STE 101
  TEMECULA, CA 92590
  Effective as of 01-AUG-19

**TALANKI, VARUN, MD**
Provider ID: N/A
- 31565 RANCHO PUEBLO RD STE 205
  TEMECULA, CA 92592
  Effective as of 01-DEC-22

**WU, MELANIE, DO†**
Provider ID: N/A
- 44045 MARGARITA RD STE 106
  TEMECULA, CA 92592
  Effective as of 01-JAN-20

**OLENSKI, KLARI, DO†**
Provider ID: N/A
- 44045 MARGARITA RD STE 106
  TEMECULA, CA 92592
  Effective as of 01-DEC-22

**NEUROLOGY CHILD**

**OBSTETRICS / GYNECOLOGY**

**ELFELT, TIMOTHY, MD†**
Provider ID: N/A
- 28780 SINGLE OAK DR STE 160
  TEMECULA, CA 92590
  Effective as of 01-SEP-21
C1. 網絡內提供者清單

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<td>CHOW, JASON, MD †</td>
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<td>41900 WINCHESTER RD STE 201</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

網絡內提供者清單

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C1. 網絡內提供者清單

專科護理醫師

ZHOU, SIWEI, MD†
Provider ID: N/A
31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

OPTOMETRIST

ARCHIBALD, JOHN, OD†
Provider ID: N/A
31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-DEC-23

ARCHIBALD, JOHN, OD†
Provider ID: N/A
31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-JUL-23

AZIZ AWAD AWADALLA,
MARINAEMAD, OD†
Provider ID: N/A
41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUN-23

AZIZ AWAD AWADALLA,
MARINAEMAD, OD†
Provider ID: N/A
41877 ENTERPRISE CIR N
STE 110
TEMECULA, CA 92590
Effective as of 01-JUL-23

AZIZ AWAD AWADALLA,
MARINAEMAD, OD†
Provider ID: N/A
41637 MARGARITA RD STE
100
TEMECULA, CA 92591
Effective as of 01-NOV-22

BARR, AUSTIN, OD
Provider ID: N/A
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COLEMAN, BROOKE, OD†
Provider ID: N/A
31950 TEMECULA PKWY
STE B-7
TEMECULA, CA 92592
Effective as of 01-FEB-22

FARAMARZI, FARNAZ, OD
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LANE, KEVIN, OD†
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100
TEMECULA, CA 92591
Effective as of 01-SEP-09

LANE, KEVIN, OD†
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41637 MARGARITA RD STE
### NETWORK PROVIDER LISTS

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**PHYSICAL MEDICINE / REHABILITATION**

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| **PHYSICIANS ASSISTANT**

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### Network Providers List

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CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

**JAKKULA, JAGAN, MD**
Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-NOV-23

**JAKKULA, JAGAN, MD**
Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

**KANUKUNTLA, TULASI, MD**
Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

**KANUKUNTLA, TULASI, MD**
Provider ID: N/A
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TEMECULA, CA 92591
Effective as of 01-OCT-23

**KANUKUNTLA, TULASI, MD**
Provider ID: N/A
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CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

**KANUKUNTLA, TULASI, MD**
Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

**KANUKUNTLA, TULASI, MD**
Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-OCT-23

**KANUKUNTLA, TULASI, MD**
Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

**KANUKUNTLA, TULASI, MD**
Provider ID: N/A
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CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

**KANUKUNTLA, TULASI, MD**
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CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

**KANUKUNTLA, TULASI, MD**
Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
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Effective as of 01-AUG-22

**KANUKUNTLA, TULASI, MD**
Provider ID: N/A
29645 RANCHO
CALIFORNIA RD STE 213
TEMECULA, CA 92591
Effective as of 01-AUG-22

**PSYCHIATRY CHILD**

**ANDERSEN, CLAIRE, MD**
Provider ID: N/A
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

**ANDERSEN, CLAIRE, MD**
Provider ID: N/A
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Effective as of 01-DEC-20

**PSYCHOLOGIST**
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C1. 網絡內提供者清單

专科護理醫師

VIZCARRA, DAVID, PT
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 101
TEMECULA, CA 92592
Effective as of 01-JUN-20

MEHTA, AMAL, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

MEHTA, CHANDRAKANT, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

RHEUMATOLOGY

AL HARASH, ABDALHAMID, MD
Provider ID: N/A
31565 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

MEHTA, AMAL, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-JUL-23

MEHTA, CHANDRAKANT, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

AL HARASH, ABDALHAMID, MD
Provider ID: N/A
31565 RANCHO PUEBLO RD
STE 205
TEMECULA, CA 92592
Effective as of 01-AUG-23

PHILLPOTTS, MÁRC, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-SEP-18

SPEECH PATHOLOGIST

O’DORAN, KAYLA, SP
Provider ID: N/A
40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Teleservice
Effective as of 01-JUN-22

WIRTH, LAURA, SP
Provider ID: N/A
40764 WINCHESTER RD
STE 590
TEMECULA, CA 92591
Effective as of 01-JUN-22

SURGERY COLON

GORSKI, TITO, MD
Provider ID: N/A
31537 RANCHO PUEBLO

SURGERY

TRIVEDI, JANKI, MD
Provider ID: N/A
31515 RANCHO PUEBLO RD
STE 203
TEMECULA, CA 92592
Effective as of 01-MAR-21
### 網絡內提供者清單

#### 專科護理醫師

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如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
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C1. 網絡內提供者清單

專科護理醫師

VU, STEVE, MD
Provider ID: N/A
27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-APR-23

WANG, NAN, MD†
Provider ID: N/A
31573 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-AUG-22

VU, STEVE, MD
Provider ID: N/A
27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-APR-23

WANG, XIUJIE, MD†
Provider ID: N/A
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

SURGERY GENERAL

VASCULAR

GORSKI, YARA, MD†
Provider ID: N/A
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

KARMUR, AMIT, DO†
Provider ID: N/A
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†
Provider ID: N/A
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-DEC-21

TIU, BRIAN, MD†
Provider ID: N/A
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單

專科護理醫師

Effective as of 01-MAY-22

TIU, BRIAN, MD†
Provider ID: N/A
 расположен
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

TIU, BRIAN, MD†
Provider ID: N/A
 расположен
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-APR-22

WANG, XIUJIE, MD†
Provider ID: N/A
 расположен
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-MAY-22

WANG, XIUJIE, MD†
Provider ID: N/A
 расположен
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-20

WANG, XIUJIE, MD†
Provider ID: N/A
 расположен
31537 RANCHO PUEBLO RD STE 202
TEMECULA, CA 92592
Effective as of 01-OCT-20

SURGERY HAND

KIM, KEVIN, DO
Provider ID: N/A
 расположен
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO
Provider ID: N/A
 расположен
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

KIM, KEVIN, DO
Provider ID: N/A
 расположен
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

TRAN, TUAN, MD
Provider ID: N/A
 расположен
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD
Provider ID: N/A
 расположен
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-APR-23

TRAN, TUAN, MD
Provider ID: N/A
 расположен
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD
Provider ID: N/A
 расположен
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

MONEYHON, MICHAEL, MD
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28780 SINGLE OAK DR STE 270
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MONEYHON, MICHAEL, MD
Provider ID: N/A
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28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

SURGERY ORTHOPEDIC

ABITBOL, JEAN JACQUES, MD†
Provider ID: N/A
 расположен
28975 OLD TOWN FRONT ST STE 200
TEMECULA, CA 92590
Effective as of 01-JUN-22

AMERI, BIJAN, DO
Provider ID: N/A
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28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23
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C1. 網絡內提供者清單
專科護理醫師

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<td>LUNA, MARIO, MD†</td>
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<td>ROBINSON, MATTHEW, DO†</td>
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<td>ROBINSON, MATTHEW, DO†</td>
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<td>RICHTER, ALEXANDER, MD</td>
<td>28780 SINGLE OAK DR STE 270, TEMECULA, CA</td>
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C1. 網絡內提供者清單
專科護理醫師

Effective as of 01-JUN-23
ROGHANI, REZA, MD
Provider ID: N/A
40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-23

Effective as of 01-JUN-23
ROGHANI, REZA, MD
Provider ID: N/A
40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JUN-23

Effective as of 01-MAR-23
ROGHANI, REZA, MD
Provider ID: N/A
40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-MAR-23

Effective as of 01-MAR-23
ROSENBERG, GARY, DO
Provider ID: N/A
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

Effective as of 01-FEB-23
ROSENBERG, GARY, DO
Provider ID: N/A
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

Effective as of 01-FEB-23
ROSENBERG, GARY, DO
Provider ID: N/A
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

Effective as of 01-FEB-23
ROSENBERG, GARY, DO
Provider ID: N/A
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

Effective as of 01-JAN-24
ROWSHAN, KASRA, MD
Provider ID: N/A
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-JAN-24

Effective as of 01-JAN-24
ROWSHAN, KASRA, MD
Provider ID: N/A
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-JAN-24

Effective as of 01-FEB-23
UPPAL, GURVINDER, MD
Provider ID: N/A
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

Effective as of 01-FEB-23
UPPAL, GURVINDER, MD
Provider ID: N/A
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

Effective as of 01-FEB-23
UPPAL, GURVINDER, MD
Provider ID: N/A
28780 SINGLE OAK DR STE 270
TEMECULA, CA 92590
Effective as of 01-FEB-23

Effective as of 01-FEB-23
SCHULTZEL, MARK, MD
Provider ID: N/A
31170 TEMECULA PKWY STE 100
TEMECULA, CA 92592
Teleservice
Effective as of 01-OCT-22

Effective as of 01-OCT-22
THOLCKE, LOREN, DO
Provider ID: N/A
40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-AUG-23

Effective as of 01-AUG-23
THOLCKE, LOREN, DO
Provider ID: N/A
40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JAN-24

Effective as of 01-JAN-24
THOLCKE, LOREN, DO
Provider ID: N/A
40949 WINCHESTER RD
TEMECULA, CA 92591
Effective as of 01-JAN-24

749
TEMECULA, CA 92590
Effective as of 01-APR-20

MUDGE, BRADLEY, MD†
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Teleservice
Effective as of 01-OCT-19

MUDGE, BRADLEY, MD†
Provider ID: N/A
44605 AVENIDA DE MISSIONES STE 202
TEMECULA, CA 92592
Teleservice
Effective as of 01-NOV-19

URIAS, DANIEL, MD
Provider ID: N/A
27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-APR-24

VU, STEVE, MD
Provider ID: N/A
27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-JUN-23

VU, STEVE, MD
Provider ID: N/A
27699 JEFFERSON AVE STE 305
TEMECULA, CA 92590
Effective as of 01-JUN-23

SURGERY THORACIC
BANSAL, NEERAJ, MD
Provider ID: N/A
31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-APR-23

BANSAL, NEERAJ, MD
Provider ID: N/A
31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-MAY-23

RASI, ALFREDO, MD†
Provider ID: N/A
31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-MAY-23

URSERY THORACIC
BANSAL, NEERAJ, MD
Provider ID: N/A
31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-APR-23

BANSAL, NEERAJ, MD
Provider ID: N/A
31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-MAY-23

BANSAL, NEERAJ, MD
Provider ID: N/A
31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-APR-23

BANSAL, NEERAJ, MD
Provider ID: N/A
31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-MAY-23

RASI, ALFREDO, MD†
Provider ID: N/A
31573 RANCHO PUEBLO RD STE 210
TEMECULA, CA 92592
Effective as of 01-MAY-23

FAMILY PRACTICE
RAY, ANNE, MD
Provider ID: N/A
31951 DOVE CANYON DR
TRABUCO CANYON, CA 92679
Effective as of 01-DEC-23

CERTIFIED REGISTERED NURSE MIDWIFE
ALLEN, ANNE, CRNM†
Provider ID: N/A
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-JUL-22

ONEILL, THERESE, CRNM
Provider ID: N/A
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Effective as of 01-NOV-23

FAMILY PRACTICE
CASTANER, ZALYA, MD†
Provider ID: N/A
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Teleservice
Effective as of 01-FEB-24

MCCHENRY, KATHRYN, DO
C1. 網絡內提供者清單
专科護理醫師

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C1. 網絡內提供者清單
專科護理醫師

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C1. 網絡內提供者清單

專科護理醫師

CHRISTY, TYLER, NPF
Provider ID: N/A
105 DURIAN ST STE A
VISTA, CA 92083
Effective as of 01-JAN-24

CHRISTY, TYLER, NPF
Provider ID: N/A
517 N HORNE ST
VISTA, CA 92083
Effective as of 01-JAN-24

CLARK, CYNTHIA, NP²
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

CORY, ALLISON, NP
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-21

CORY, ALLISON, NP
Provider ID: N/A
105 DURIAN ST STE B
VISTA, CA 92083
Effective as of 01-FEB-24

CORY, ALLISON, NP
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-FEB-24

CROTTEAU, ALEX, NP
Provider ID: N/A
204 S SANTA FE AVE
VISTA, CA 92084
Effective as of 01-MAY-21

DEKKERS-O’HARE, INGRID, NP⁠
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-21

DO, JACKIE, NP
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

EKLUND, BONNIE, NP⁠
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

EKLUND, BONNIE, NP⁠
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

EKLUND, BONNIE, NP⁠
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1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

HALGEDAHL, YI, NP
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VISTA, CA 92084
Effective as of 01-JAN-21

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HOWELL, AMANDA, NP
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VISTA, CA 92083
Effective as of 01-JAN-24

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Effective as of 01-JAN-24

JONES, STACY, NP
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KAYE, ALYSON, NP
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KAYE, ALYSON, NP
Provider ID: N/A
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Effective as of 01-OCT-21

KELLEHER, BRIDGET, NP
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KELLEHER, BRIDGET, NP
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1000 VALE TERRACE DR
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Effective as of 01-FEB-24
C1. 網絡內提供者清單

專科護理醫師

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専科護理醫師

Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

WINDHAM, SUZONNE, NP
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

YCASAS, EMILY, NP
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

CERTIFIED REGISTERED NURSE MIDWIFE

GUIDI, CASEY, CRNM
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23

ZAMORA-FLYR, MARIA, CRNM
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

ZAMORA-FLYR, MARIA, CRNM
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

CHIROPRACTOR

CORTEZ, JAIME, DC†
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

CORTEZ, JAIME, DC†
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

JU, NATHANIEL, DC†
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

JU, NATHANIEL, DC†
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

JU, NATHANIEL, DC†
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134 GRAPEVINE RD
VISTA, CA 92083
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JU, NATHANIEL, DC†
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
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JU, NATHANIEL, DC†
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

GRUSHCHAK, SOLOMIYA, MD
Provider ID: N/A
1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-OCT-21

OLSON, ROBERT, DC
Provider ID: N/A
906 SYCAMORE AVE STE 210
VISTA, CA 92081
Effective as of 01-SEP-21

DERMATOLOGY

GRUSHCHAK, SOLOMIYA, MD
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1934 VIA CTR STE B
VISTA, CA 92081
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VISTA, CA 92081
Effective as of 01-JAN-24

HENDERSON, GREGORY, MD†
Provider ID: N/A
1934 VIA CTR STE B
VISTA, CA 92081
Effective as of 01-SEP-21

755
C1. 網絡內提供者清單
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### C1. 網絡內提供者清單

**專科護理醫師**

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<td>SUBRAMANIAN, RUPA, MD†</td>
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<td>PARKS, MONICA, MD</td>
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*Teleservice*

**BUI, HANH, MD**

Provider ID: N/A

2067 W VISTA WAY STE 295

VISTA, CA 92083

Effective as of 01-JUL-23

**DO, HULBERT, MD†**

Provider ID: N/A

1000 VALE TERRACE DR

VISTA, CA 92084

Effective as of 01-JUL-22

**KABRA, ASHISH, MD**

Provider ID: N/A

906 SYCAMORE AVE STE 104

VISTA, CA 92081

Effective as of 01-JAN-24

**MOUSSAVIAN, MEHRAN, DO†**

Provider ID: N/A

1000 VALE TERRACE DR

VISTA, CA 92084

Effective as of 01-JUL-22

**MOUSSAVIAN, MEHRAN, DO†**

Provider ID: N/A

1000 VALE TERRACE DR

VISTA, CA 92084

Effective as of 01-JAN-24

**PARIKH, MILIND, DO†**

Provider ID: N/A

1000 VALE TERRACE DR

VISTA, CA 92084

Effective as of 01-JUL-22

**INTERNAL MEDICINE**

**INTERVENTIONAL CARDIOLOGY**

**HOSPICE AND PALLIATIVE MEDICINE**

**HOSPITALIST MD/DO**

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<td>01-JAN-24</td>
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C1. 網絡內提供者清單
専科護理醫師

1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

WILSON, CARLENE, LCSW
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23

ZAPPONE, ALIDA, LCSW
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Teleservice
Effective as of 01-JAN-24

ZAPPONE, ALIDA, LCSW
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Teleservice
Effective as of 01-JAN-24

MARRIAGE FAMILY
THERAPIST

GROVE, VICKI, MFT
Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Effective as of 01-JAN-24

MEYERHOF, GREA, MFT
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JAN-24

MEYERHOF, GREA, MFT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

OBSTETRICS / GYNECOLOGY

ARRIETA, IRIS, MDT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-24

ARRIETA, IRIS, MDT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

ARRIETA, IRIS, MDT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

KARANIKKIS, CHRISTOS, DODT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-24

KARANIKKIS, CHRISTOS, DODT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAR-18

KARANIKKIS, CHRISTOS, DODT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

KARANIKKIS, CHRISTOS, DODT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LEON, JOSUE, MDT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

LEON, JOSUE, MDT
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-21

LEONARD, LISA, MDT

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
### C1. 網絡內提供者清單

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<th>網絡內提供者清單</th>
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<td><strong>LEONARD, LISA, MD</strong>†</td>
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<td><strong>QUAN, MARIA, MD</strong>†</td>
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<td><strong>AZIMI, SHERRI, OD</strong>†</td>
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專科護理醫師

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專科護理醫師

TAM, EMILY, OD
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-JUL-22

TAM, EMILY, OD
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

TANG, ASHLEY, OD†
Provider ID: N/A
2067 W VISTA WAY STE 120
VISTA, CA 92083
Teleservice
Effective as of 01-NOV-21

TRAN, JESSICA, OD
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-DEC-23

OTOLARYNGOLOGY

BERRY, JULIE, MD†
Provider ID: N/A
2023 W VISTA WAY STE J
VISTA, CA 92083
Effective as of 01-AUG-06

KUSHNARYOV, ANTON, MD†
Provider ID: N/A
2023 W VISTA WAY STE J
VISTA, CA 92083
Effective as of 01-OCT-17

PEDIATRICS

KAISER, EMILY, MD
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084

Effective as of 01-JAN-24

RONAN, KEVIN, MD
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-MAY-23

RONAN, KEVIN, MD
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-MAY-23

PHYSICIANS ASSISTANT

GLASSER, DANIEL, PA
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

GLASSER, DANIEL, PA
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

KUPIS, ROBERT, PA
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

LEPARD, KRISTINA, PA
Provider ID: N/A
204 S SANTA FE AVE
VISTA, CA 92084
Teleservice
Effective as of 01-MAR-23

THEPVONGSA, MELISSA, PA
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

WALLACE, STEPHANIE, PA
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUN-23

WEAVER, APRIL, PA
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-OCT-21

WEAVER, APRIL, PA
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-OCT-21

PODIATRIST

MILLER, JULIE, DPM
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JAN-24

MILLER, JULIE, DPM
Provider ID: N/A
1000 VALE TERRACE DR
VISTA, CA 92084
Effective as of 01-JUL-22

MILLER, JULIE, DPM
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-APR-24

MILLER, JULIE, DPM
Provider ID: N/A
134 GRAPEVINE RD
VISTA, CA 92083
Effective as of 01-FEB-24
### PREVENTATIVE MEDICINE

#### GENERAL

**DEPORTO, TANYA, MD**  
Provider ID: N/A  
- 204 S SANTA FE AVE  
  VISTA, CA 92084  
  Teleservice  
  Effective as of 01-MAY-21

**CHRISTIANSON, WARREN, DO**  
Provider ID: N/A  
- 134 GRAPEVINE RD  
  VISTA, CA 92083  
  Effective as of 01-AUG-21

**PSYCHIATRY**

**BELL, JENNIFER, DO**  
Provider ID: N/A  
- 1000 VALE TERRACE DR  
  VISTA, CA 92084  
  Effective as of 01-FEB-24

**BELL, JENNIFER, DO**  
Provider ID: N/A  
- 134 GRAPEVINE RD  
  VISTA, CA 92083  
  Effective as of 01-FEB-24

**BELL, JENNIFER, DO**  
Provider ID: N/A  
- 134 GRAPEVINE RD  
  VISTA, CA 92083  
  Effective as of 01-FEB-24

**BELL, JENNIFER, DO**  
Provider ID: N/A  
- 1000 VALE TERRACE DR  
  VISTA, CA 92084  
  Effective as of 01-FEB-24

**CHRISTIANSON, WARREN, DO**  
Provider ID: N/A  
- 1000 VALE TERRACE DR  
  VISTA, CA 92084  
  Effective as of 01-MAY-23

**PUBLIC HEALTH**

**WALKER, BRADLEY, MD**  
Provider ID: N/A  
- 1000 VALE TERRACE DR  
  VISTA, CA 92084  
  Effective as of 01-MAY-21

**PULMONARY DISEASES**

**HSING, ANDREW, MD**  
Provider ID: N/A  
- 2067 W VISTA WAY STE 160  
  VISTA, CA 92083  
  Effective as of 01-JAN-24

**HSING, ANDREW, MD**  
Provider ID: N/A  
- 2067 W VISTA WAY STE 160  
  VISTA, CA 92083  
  Effective as of 01-FEB-23

**MAGANA, MARISA, MD**  
Provider ID: N/A  
- 2067 W VISTA WAY STE 160  
  VISTA, CA 92083  
  Effective as of 01-FEB-24

**PINO, ALEJANDRO, MD**  
Provider ID: N/A  
- 2067 W VISTA WAY STE 160  
  VISTA, CA 92083  
  Effective as of 01-FEB-23

**ZHANG, MICHELLE, MD**  
Provider ID: N/A  
- 2067 W VISTA WAY STE D  
  VISTA, CA 92083  
  Effective as of 01-SEP-23

**RADIOLOGY DIAGNOSTIC**

**PATEL, NIKHIL, MD**  
Provider ID: N/A  
- 906 SYCAMORE AVE STE 100  
  VISTA, CA 92081
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C1. 網絡內提供者清單
專科護理醫師

HANNA, KAREN, MD
Provider ID: N/A
2385 S MELROSE DR
VISTA, CA 92081
Teleservice
Effective as of 01-DEC-14

SURGERY GENERAL
VASCULAR

BUNKE, NISHA, MD
Provider ID: N/A
906 SYCAMORE AVE STE 100
VISTA, CA 92081
Teleservice
Effective as of 01-JUN-23

SURGERY
NEUROLOGICAL

STERN, MARK, MD
Provider ID: N/A
326 S MELROSE DR STE 200
VISTA, CA 92081
Effective as of 01-SEP-23

SURGERY THORACIC

GREWAL, NAVROSE, MD
Provider ID: N/A
161 THUNDER DR
VISTA, CA 92083
Effective as of 01-DEC-21

ANESTHESIOLOGY

KRAUSE, MARTIN, MD
Provider ID: N/A
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
Effective as of 01-APR-23

IHEMEDU, MAGNUS, NPF
Provider ID: N/A
36320 INLAND VALLEY DR STE 303
WILDOMAR, CA 92595
Effective as of 01-NOV-22

ONUOHA, NOJA, NP
Provider ID: N/A
36320 INLAND VALLEY DR STE 303
WILDOMAR, CA 92595
Effective as of 01-APR-23

THOMAS, STEPHEN, NPF
Provider ID: N/A
36320 INLAND VALLEY DR STE 308
WILDOMAR, CA 92595
Effective as of 01-MAR-21

CHIROPRACTOR

ADAMS, CONRAD, LAC
Provider ID: N/A
32475 CLINTON KEITH RD STE 108
WILDOMAR, CA 92595
Effective as of 01-MAR-23

GASTROENTEROLOGY

CHANGCHIEN, ERIC, MD
Provider ID: N/A
36243 INLAND VALLEY DR STE 280
WILDOMAR, CA 92595
C1. 網絡內提供者清單

**INTERNAL MEDICINE**

**CHANG, DAVID, MD**
Provider ID: N/A
- 36320 INLAND VALLEY DR
- STE 308
- WILDOMAR, CA 92595
Effective as of 01-MAR-19

**YU, JERRY, MD**
Provider ID: N/A
- 36320 INLAND VALLEY DR
- STE 307
- WILDOMAR, CA 92595
Effective as of 01-JUN-19

**NANDI, SHANKHA, DO**
Provider ID: N/A
- 36320 INLAND VALLEY DR
- STE 308
- WILDOMAR, CA 92595
Effective as of 01-MAY-15

**YU, JERRY, MD**
Provider ID: N/A
- 36320 INLAND VALLEY DR
- STE 307
- WILDOMAR, CA 92595
Effective as of 01-DEC-23

**WANG, WENG-LIH, MD**
Provider ID: N/A
- 36320 INLAND VALLEY DR
- STE 308
- WILDOMAR, CA 92595
Effective as of 01-OCT-19

**YU, JERRY, MD**
Provider ID: N/A
- 36320 INLAND VALLEY DR
- STE 307
- WILDOMAR, CA 92595
Effective as of 01-DEC-23

**PATEL, SAGAR, MD**
Provider ID: N/A
- 36485 INLAND VALLEY DR
- WILDOMAR, CA 92595
Effective as of 01-AUG-21

**LICENSED CLINICAL SOCIAL WORKER**

**JONES, VALORIA, LCSW**
Provider ID: N/A
- 36320 INLAND VALLEY DR
- STE 303
- WILDOMAR, CA 92595
Effective as of 01-JUL-23

**JONES, VALORIA, LCSW**
Provider ID: N/A
- 36320 INLAND VALLEY DR
- STE 303
- WILDOMAR, CA 92595
Effective as of 01-JUL-23

**JONES, VALORIA, LCSW**
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- STE 303
- WILDOMAR, CA 92595
Effective as of 01-JUL-23

**JONES, VALORIA, LCSW**
Provider ID: N/A
- 36320 INLAND VALLEY DR
- STE 303
- WILDOMAR, CA 92595
Effective as of 01-JUL-23

**NEPHROLOGY**

**CHANG, DAVID, MD**
Provider ID: N/A
- 36485 INLAND VALLEY DR
- WILDOMAR, CA 92595
Effective as of 01-SEP-23

---

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
C1. 網絡內提供者清單
專科護理醫師

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您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意,某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权,然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
C1. 網路內提供者清單

專科護理醫師

NANDI, SHANKHA, DO
Provider ID: N/A
36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO
Provider ID: N/A
36320 INLAND VALLEY DR
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WILDOMAR, CA 92595
Effective as of 01-JUN-15

NANDI, SHANKHA, DO
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Effective as of 01-JUN-15

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36320 INLAND VALLEY DR
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Effective as of 01-MAY-15

WANG, WENG-LIH, MD
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Effective as of 01-MAY-15

WANG, WENG-LIH, MD
Provider ID: N/A
36320 INLAND VALLEY DR
STE 308
WILDOMAR, CA 92595
Effective as of 01-MAY-15

您的PCP的醫生團體可能有自己的網路內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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<td>CA</td>
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</table>

Your PCP’s medical group may have its own network of mental health service providers. Please review the list below. You may contact these providers directly. Please note, certain services may require the mental health service provider to obtain Blue Shield prior authorization before the service can be covered.

For online access to the mental health service provider list, please visit blueshieldca.com/fad.
C1. 網絡內提供者清單

網絡內提供者清單

**PUCHAKAYALA, NANDITA, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 303
  - WILDOMAR, CA 92595

Effective as of 01-AUG-22

**CHUNG, ARTHUR, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-JUN-23

**PUCHAKAYALA, NANDITA, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 300
  - WILDOMAR, CA 92595

Effective as of 01-AUG-22

**KUMAR, AVNEE, MD**
Provider ID: N/A

- **Address:**
  - 36485 INLAND VALLEY DR
  - WILDOMAR, CA 92595

Effective as of 01-JUL-23

**SURI, RAJAT, MD**
Provider ID: N/A

- **Address:**
  - 36485 INLAND VALLEY DR
  - WILDOMAR, CA 92595

Effective as of 01-AUG-21

**KANG, JOSEPH, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-JUN-23

**KANG, JOSEPH, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-JUN-23

**KANG, JOSEPH, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-JUN-23

**KANG, JOSEPH, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-JUL-23

**KANG, JOSEPH, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-JUN-23

**KANG, JOSEPH, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-AUG-22

**MERLO, CLIFFORD, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-JUN-23

**MERLO, CLIFFORD, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-JUN-23

**RHA, JANICE, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - WILDOMAR, CA 92595

Effective as of 01-NOV-23

**MASON, JAMES, MD**
Provider ID: N/A

- **Address:**
  - 36450 INLAND VALLEY DR
  - STE 101
  - WILDOMAR, CA 92595

Effective as of 01-MAR-10

**MASON, JAMES, MD**
Provider ID: N/A

- **Address:**
  - 36450 INLAND VALLEY DR
  - STE 101
  - WILDOMAR, CA 92595

Effective as of 01-SEP-14

**MASON, JAMES, MD**
Provider ID: N/A

- **Address:**
  - 36450 INLAND VALLEY DR
  - STE 101
  - WILDOMAR, CA 92595

Effective as of 01-SEP-14

**MASON, JAMES, MD**
Provider ID: N/A

- **Address:**
  - 36450 INLAND VALLEY DR
  - STE 101
  - WILDOMAR, CA 92595

Effective as of 01-SEP-14

**LAWRENSON, LESLEY, MD**
Provider ID: N/A

- **Address:**
  - 36320 INLAND VALLEY DR
  - STE 207
  - WILDOMAR, CA 92595

Effective as of 01-NOV-23

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### C1. 網絡內提供者清單

#### 專科護理醫師

<table>
<thead>
<tr>
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<tbody>
<tr>
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<td>N/A</td>
<td>36320 INLAND VALLEY DR STE 105</td>
<td>01-MAR-19</td>
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<tr>
<td>SUN, JASON, MD</td>
<td>N/A</td>
<td>36320 INLAND VALLEY DR STE 105</td>
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<tr>
<td>CASTELLON, SHAWN, PT</td>
<td>N/A</td>
<td>32246 CLINTON KEITH RD STE 103</td>
<td>01-JUL-23</td>
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<tr>
<td>TSAI, CHIAHONG, PT</td>
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<td>01-NOV-23</td>
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<tr>
<td>GS, TITO, MD†</td>
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<td>36320 INLAND VALLEY DR STE 101</td>
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<tr>
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<td>N/A</td>
<td>36320 INLAND VALLEY DR STE 101</td>
<td>01-SEP-16</td>
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#### REGISTERED DIETITIAN / NUTRITIONIST

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<th>Effective Date</th>
</tr>
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<tbody>
<tr>
<td>ATTOBRA, TATIANA, RD</td>
<td>N/A</td>
<td>36320 INLAND VALLEY DR STE 301</td>
<td>01-DEC-22</td>
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#### REGISTERED PHYSICAL THERAPIST

<table>
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<th>Name</th>
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<tr>
<td>ALY, DILYANA, PT†</td>
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<td>36243 INLAND VALLEY DR STE 110</td>
<td>01-JUL-19</td>
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<td>N/A</td>
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#### SPEECH PATHOLOGIST

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<td>WIRTH, LAURA, SP</td>
<td>N/A</td>
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<td>01-JUN-22</td>
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</tbody>
</table>

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### 網絡內提供者清單

<table>
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<th>医生姓名</th>
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<th>地址</th>
<th>有效的日期</th>
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<tr>
<td>AHMED, MOHAMED, MD†</td>
<td>N/A</td>
<td>36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595</td>
<td>Effective as of 01-MAY-23</td>
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<tr>
<td>ATCHISON, MARVIN, MD†</td>
<td>N/A</td>
<td>36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595</td>
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<td>ATCHISON, MARVIN, MD†</td>
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<td>ATCHISON, MARVIN, MD†</td>
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### C1. 網絡內提供者清單

#### 專科護理醫師

<table>
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<tr>
<th>Provider ID: N/A</th>
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<td>CORDERO, RAYMUND, MD†</td>
<td>36320 INLAND VALLEY DR STE 101A WILDOMAR, CA 92595</td>
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<tr>
<td>CORDERO, RAYMUND, MD†</td>
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<td>DADA, STEPHEN, MD</td>
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<tr>
<td>Gorski, Tito, MD[^1]</td>
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<td>Gorski, Tito, MD[^1]</td>
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<tr>
<td>Husted, John, MD[^1]</td>
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<tr>
<td>Johnsen, Hege, MD[^1]</td>
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<tr>
<td>Karmur, Amit, DO[^1]</td>
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<td>Karmur, Amit, DO[^1]</td>
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<td>01-SEP-16</td>
<td>36320 Inland Valley Dr Ste 101, Wildomar, CA 92595</td>
</tr>
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</table>

[^1]: The network is specific to your PCP's doctor group. Please refer to the list below for the list of providers. You can contact these providers directly. Please note that certain services may require prior authorization from the Blue Shield provider before they can be covered.

| Online精神健康服務提供者清單
| Online mental health service provider list

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### C1. 網絡內提供者清單

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<td>KARMUR, AMIT, DO†</td>
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<tr>
<td>LEE, JENNY, MD†</td>
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<tr>
<td>MAC, OLIVIA, MD†</td>
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<td>01-MAR-19</td>
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<tr>
<td>MAC, OLIVIA, MD†</td>
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<td>NAFIU, BOLAJI, MD†</td>
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Provider ID: N/A
36320 INLAND VALLEY DR
STE 101
WILDOMAR, CA 92595
Effective as of 01-SEP-19

SURGERY GENERAL

VASCULAR

GORSKI, YARA, MD†
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

GORSKI, YARA, MD†
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

GORSKI, YARA, MD†
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-SEP-16

GORSKI, YARA, MD†
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

KARMUR, AMIT, DO†
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

KARMUR, AMIT, DO†
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-SEP-16

KARMUR, AMIT, DO†
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

KARMUR, AMIT, DO†
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

TIU, BRIAN, MD†
Provider ID: N/A
36320 INLAND VALLEY DR
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WILDOMAR, CA 92595
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Effective as of 01-DEC-21

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WILDOMAR, CA 92595
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WILDOMAR, CA 92595
Effective as of 01-MAY-22

NAFIU, BOLAJI, MD†
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-19
C1. 網絡內提供者清單

專科護理醫師

WANG, XIUJIE, MD
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-MAY-22

WANG, XIUJIE, MD
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-OCT-20

WANG, XIUJIE, MD
Provider ID: N/A
36320 INLAND VALLEY DR
STE 101A
WILDOMAR, CA 92595
Effective as of 01-OCT-20
C3. 專業護理機構（SNF）

CAPISTRANO BEACH CARE CENTER
- 35410 DEL REY
  - CAPISTRANO BEACH, CA
  - 92624
  - (949) 496-5786
  - Effective as of 01-AUG-14

CAPISTRANO BEACH EXTENDED CARE AND LIVING CTR
- 35410 DEL REY
  - CAPISTRANO BEACH, CA
  - 92624
  - (949) 496-5786
  - Effective as of 01-JAN-12

BAYSHIRE CARLSBAD
- 3140 EL CAMINO REAL
  - CARLSBAD, CA
  - 92008
  - (760) 720-9898
  - Effective as of 01-JUL-22

LAS VILLAS DE CARLSBAD OPERATIONS LLC
- 1088 LAGUNA DR
  - CARLSBAD, CA
  - 92008
  - (760) 434-7116
  - Effective as of 01-FEB-13

SOUTH BAY POST ACUTE CARE
- 553 F ST
  - CHULA VISTA, CA
  - 91910
  - (619) 426-8611
  - Effective as of 01-NOV-19

AVOCADO POST ACUTE
- 510 E WASHINGTON AVE
  - EL CAJON, CA
  - 92020
  - (619) 440-1211
  - Effective as of 01-JAN-20

BRADLEY COURT SPECIAL CARE CENTER
- 675 E BRADLEY AVE
  - EL CAJON, CA
  - 92021
  - (619) 448-6633
  - Effective as of 01-DEC-21

COTTONWOOD CANYON HEALTHCARE CENTER
- 1391 E MADISON AVE
  - EL CAJON, CA
  - 92021
  - (619) 444-1107
  - Effective as of 01-OCT-11

COUNTRY HILLS POST ACUTE
- 1580 BROADWAY
  - EL CAJON, CA
  - 92021
  - (619) 441-8745
  - Effective as of 15-NOV-20

MAGNOLIA POST ACUTE CARE
- 635 S MAGNOLIA AVE
  - EL CAJON, CA
  - 92020
  - (616) 442-8826
  - Effective as of 01-NOV-19

MAGNOLIA SPECIAL CARE CENTER
- 635 S MAGNOLIA AVE
  - EL CAJON, CA
  - 92020
  - (616) 442-8826
  - Effective as of 01-JAN-12

PARKSIDE HEALTH AND WELLNESS CENTER
- 444 W LEXINGTON AVE
  - EL CAJON, CA
  - 92020
  - (619) 442-7744
  - Effective as of 01-NOV-19

PARKSIDE SPECIAL CARE CENTER
- 444 W LEXINGTON AVE
  - EL CAJON, CA
  - 92020
  - (619) 442-7744
  - Effective as of 01-JAN-12

SAN DIEGO POST ACUTE CENTER
- 1201 S ORANGE AVE
  - EL CAJON, CA
  - 92020
  - (619) 441-1988
  - Effective as of 01-SEP-14

SOMERSET SUBACUTE AND CARE
- 151 CLAYDELLE AVE
  - EL CAJON, CA
  - 92020
  - (619) 442-0245
  - Effective as of 01-NOV-19

VICTORIA POST ACUTE CARE
- 654 S ANZA ST
  - EL CAJON, CA
  - 92020
  - (619) 440-5005
  - Effective as of 01-NOV-19

VICTORIA SPECIAL CARE CTR
- 654 S ANZA ST
  - EL CAJON, CA
  - 92020
  - (619) 440-5005
  - Effective as of 01-JAN-12

VILLA LAS PALMAS HEALTHCARE CTR
- 622 S ANZA ST
  - EL CAJON, CA
  - 92020
  - (619) 442-0544
  - Effective as of 01-OCT-11

AVIARA HEALTHCARE CENTER
- 944 REGAL RD
  - ENCINITAS, CA
  - 92024
  - (619) 442-0245
  - Effective as of 01-OCT-11

ENCINITAS NURSING AND
C3. 專業護理機構（SNF）

REHAB CTR
- 900 SANTA FE DR
  ENCINITAS, CA 92024
  (760) 753-6423
  Effective as of 01-DEC-12

ESCONDIDO CARE CENTER
- 421 E MISSION AVE
  ESCONDIDO, CA 92025
  (760) 747-0430
  Effective as of 01-MAY-13

LIFE CARE CENTER OF
ESCONDIDO
- 1980 FELICITA RD
  ESCONDIDO, CA 92025
  (760) 741-6109
  Effective as of 01-JAN-12

PALOMAR HEIGHTS CARE CTR
- 1260 E OHIO AVE
  ESCONDIDO, CA 92027
  (760) 746-1100
  Effective as of 01-JAN-12

PALOMAR VISTA
HEALTHCARE CTR
- 201 N FIG ST
  ESCONDIDO, CA 92025
  (760) 746-0303
  Effective as of 01-NOV-11

REDWOOD TERRACE
- 710 W 13TH AVE
  ESCONDIDO, CA 92025
  (760) 291-2736
  Effective as of 01-NOV-17

VALLE VISTA POST ACUTE
- 1025 W 2ND AVE
  ESCONDIDO, CA 92025
  (760) 745-1842
  Effective as of 01-DEC-12

FALLBROOK SKILLED
NURSING
- 325 POTTER ST
  FALLBROOK, CA 92028
  (760) 728-2330
  Effective as of 01-FEB-20

DEVONSHIRE CARE CENTER
- 1350 E DEVONSHIRE AVE
  HEMET, CA 92544
  (951) 925-2571
  Effective as of 01-JAN-12

HEMET GLOBAL MEDICAL CENTER
- 1117 E DEVONSHIRE AVE
  HEMET, CA 92543
  (951) 652-2811
  Effective as of 01-JAN-20

MANORCARE HEALTH SERVICES HEMET
- 1717 W STETSON AVE
  HEMET, CA 92545
  (951) 925-9171
  Effective as of 01-JAN-12

RAMONA REHAB AND POST ACUTE CTR
- 485 W JOHNSTON AVE
  HEMET, CA 92543
  (951) 652-0011
  Effective as of 15-APR-19

SAN JACINTO HEALTHCARE
- 275 N SAN JACINTO ST
  HEMET, CA 92543
  (951) 658-9441
  Effective as of 01-MAR-13

THE VILLAGE HEALTHCARE CENTER
- 2400 W ACACIA AVE
  HEMET, CA 92545
  (951) 766-5116
  Effective as of 01-JAN-12

LA JOLLA NURSING AND REHAB CTR
- 2552 TORREY PINES RD
  LA JOLLA, CA 92037
  (858) 453-5810
  Effective as of 01-DEC-12

THE COVE AT LA JOLLA
- 7160 FAY AVE
  LA JOLLA, CA 92037
  (858) 459-4361
  Effective as of 01-NOV-19

ARBOR HILLS NURSING CENTER
- 7800 PARKWAY DR
  LA MESA, CA 91942
  (619) 460-2330
  Effective as of 01-DEC-20

COMMUNITY CARE CENTER
- 8665 LA MESA BLVD
  LA MESA, CA 91942
  (619) 465-0702
  Effective as of 01-APR-16

COUNTRY MANOR LA MESA HEALTHCARE CENTER
- 5696 LAKE MURRAY BLVD
  LA MESA, CA 91942
  (619) 460-7871
  Effective as of 01-AUG-14

GROSSMONT POST ACUTE CARE
- 8787 CENTER DR
  LA MESA, CA 91942
  (619) 460-4444
  Effective as of 01-NOV-19

LA MESA HEALTHCARE CTR
- 3780 MASSACHUSETTS AVE
  LA MESA, CA 91941
  (619) 465-1313
  Effective as of 01-OCT-11
### C3. 專業護理機構 (SNF)

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Effective as of</th>
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<tr>
<td>PARKWAY HILLS NURSING &amp; REHAB</td>
<td>7760 PARKWAY DR</td>
<td>(619) 469-0124</td>
<td>01-APR-20</td>
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<td>LA MESA, CA 91942</td>
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<td>LAGUNA HILLS HEALTH AND REHAB CTR</td>
<td>24452 HEALTH CENTER DR</td>
<td>(949) 837-8000</td>
<td>01-APR-18</td>
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<td>LAGUNA HILLS, CA 92653</td>
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<td>PALM TERRACE HLTHCARE AND REHAB CTR</td>
<td>24962 CALLE ARAGON</td>
<td>(949) 587-9000</td>
<td>01-APR-18</td>
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<td>LAGUNA WOODS, CA 92637</td>
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<tr>
<td>FREEDOM VILLAGE HEALTHCARE CTR</td>
<td>23442 EL TORO RD</td>
<td>(949) 472-8353</td>
<td>01-JAN-12</td>
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<td>LAKE FOREST, CA 92630</td>
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<tr>
<td>LAKE FOREST NURSING CENTER</td>
<td>25652 OLD TRABUCO RD</td>
<td>(949) 380-9380</td>
<td>01-JAN-12</td>
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<td>LAKE FOREST, CA 92630</td>
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<tr>
<td>BELLA VISTA HEALTH CENTER</td>
<td>7922 PALM ST</td>
<td>(619) 644-1000</td>
<td>01-SEP-13</td>
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<td>LEMON GROVE, CA 91945</td>
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<td>8351 BROADWAY</td>
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<td>LEMON GROVE, CA 91945</td>
<td>(619) 463-0294</td>
<td>01-NOV-11</td>
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<td>MURRIETA HEALTH AND REHABILITATION CTR</td>
<td>24100 MONROE AVE</td>
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<td>MURRIETA, CA 92562</td>
<td>(951) 600-4640</td>
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<tr>
<td>CASTLE MANOR NURSING AND REHABILITATION CTR</td>
<td>541 S V AVE</td>
<td>NATIONAL CITY, CA 91950</td>
<td>01-DEC-20</td>
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<td>NATIONAL CITY, CA 91950</td>
<td>(619) 791-7900</td>
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<td>FRIENDSHIP MANOR NURSING AND REHABILITATION CTR</td>
<td>902 EUCLID AVE</td>
<td>NATIONAL CITY, CA 91950</td>
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<tr>
<td>PARADISE VALLEY HEALTHCARE CENTER</td>
<td>2575 E 8TH ST</td>
<td>NATIONAL CITY, CA 91950</td>
<td>01-OCT-20</td>
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<td>NATIONAL CITY, CA 91950</td>
<td>(619) 470-6700</td>
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<td>WINDSOR GARDENS CONV CTR OF SAN DIEGO</td>
<td>220 E 24TH ST</td>
<td>NATIONAL CITY, CA 91950</td>
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<td>NATIONAL CITY, CA 91950</td>
<td>(619) 474-6741</td>
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<tr>
<td>LA PALOMA HEALTHCARE CTR</td>
<td>3232 THUNDER DR</td>
<td>OCEANSIDE, CA 92056</td>
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<td>OCEANSIDE, CA 92056</td>
<td>(760) 724-2193</td>
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<td>BOULDER CREEK POST ACUTE</td>
<td>12696 MONTE VISTA RD</td>
<td>(858) 487-6242</td>
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<td>POWAY HEALTHCARE CENTER</td>
<td>15632 POMERADO RD</td>
<td>(858) 485-5153</td>
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<td>THE VILLAS AT POWAY</td>
<td>15615 POMERADO RD</td>
<td>(858) 613-4545</td>
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<tr>
<td>VILLA MONTE VISTA</td>
<td>12696 MONTE VISTA RD</td>
<td>(858) 487-6242</td>
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<td>ARROYO VISTA NURSING CTR</td>
<td>3022 45TH ST</td>
<td>(619) 283-5855</td>
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<td>BRIGHTON PLACE SAN DIEGO</td>
<td>1350 EUCLID AVE</td>
<td>S A N D I E G O, CA 92105</td>
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<td>SAN DIEGO, CA 92105</td>
<td>(619) 263-2166</td>
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<td>CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR</td>
<td>11895 AVENUE OF INDUSTRY</td>
<td>SAN DIEGO, CA 92128</td>
<td>01-NOV-11</td>
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<td>SAN DIEGO, CA 92128</td>
<td>(858) 673-0101</td>
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</table>
C3. 專業護理機構（SNF）

CLAIREMONT HEALTHCARE AND WELLNESS CENTER LLC
8060 FROST ST
SAN DIEGO, CA 92123
(619) 224-4141
Effective as of 01-JAN-12

GOLDEN HILL POST ACUTE
1201 34TH ST
SAN DIEGO, CA 92102
(619) 232-2946
Effective as of 01-MAY-23

HILLCREST HEIGHTS HEALTHCARE CENTER
4033 6TH AVE
SAN DIEGO, CA 92103
(619) 297-4086
Effective as of 01-MAY-24

JACOB HEALTH CARE CENTER LLC
4075 54TH ST
SAN DIEGO, CA 92105
(619) 582-5168
Effective as of 01-APR-16

KEARNY MESA CONVALESCENT AND NURSING HOME
7675 FAMILY CIR
SAN DIEGO, CA 92111
(858) 278-8121
Effective as of 01-DEC-20

MISSION HILLS POST ACUTE CARE
3680 REYNARD WAY
SAN DIEGO, CA 92103
(619) 297-4484
Effective as of 01-NOV-19

POINT LOMA CONVALESCENT HSP
3232 DUKE ST

SAN DIEGO, CA 92110
(858) 672-3900
Effective as of 01-JAN-12

REO VISTA HEALTHCARE CTR
6061 BANBURY ST
SAN DIEGO, CA 92139
(619) 475-2211
Effective as of 01-OCT-11

ST PAULS HEALTH CARE CENTER
235 NUTMEG ST
SAN DIEGO, CA 92103
(619) 677-3895
Effective as of 01-JAN-18

THE SHORES POST ACUTE
2828 MEADOW LARK DR
SAN DIEGO, CA 92123
(858) 277-6460
Effective as of 01-OCT-13

THE SPRINGS AT PACIFIC REGENCY
3884 NOBEL DR
SAN DIEGO, CA 92122
(858) 625-8700
Effective as of 01-NOV-11

TORREY PINES SENIOR LIVING
13101 HARTFIELD AVE
SAN DIEGO, CA 92130
(858) 259-2222
Effective as of 01-JUN-16

UNIVERSITY CARE CENTER
5602 UNIVERSITY AVE
SAN DIEGO, CA 92105
(619) 583-1993
Effective as of 01-OCT-11

VILLA RANCHO BERNARDO CARE CENTER
15720 BERNARDO CENTER DR
SAN DIEGO, CA 92127
(858) 672-3900
Effective as of 01-JAN-12

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL
1201 34TH ST
SAN DIEGO, CA 92102
(619) 232-2946
Effective as of 01-JAN-12

BROOKDALE SAN JUAN CAPISTRANO
31741 RANCHO VIEJO RD
SAN JUAN CAPISTRANO, CA 92675
(949) 248-8855
Effective as of 01-JUN-16

STANFORD COURT SKILLED NURSING AND REHAB CENTER
8778 CUYAMACA ST
SANTEE, CA 92071
(619) 449-5555
Effective as of 01-DEC-20

BRIGHTON PLACE EAST
8625 LAMAR ST
SPRING VALLEY, CA 91977
(619) 461-3222
Effective as of 01-JAN-12

BRIGHTON PLACE SPRING VALLEY
9009 CAMPO RD
SPRING VALLEY, CA 91977
(619) 460-2711
Effective as of 01-JAN-12

SUN CITY CONVALESCENT CENTER
27600 ENCANTO DR
SUN CITY, CA 92586
(951) 679-6858
C3. 專業護理機構 (SNF)

Effective as of 01-JAN-12

TEMECULA HEALTHCARE CENTER

44280 CAMPANULA WAY
TEMECULA, CA 92592
(951) 466-0200
Effective as of 02-MAR-22

LA FUENTE POST ACUTE

247 E BOBIER DR
VISTA, CA 92084
(760) 945-3033
Effective as of 01-DEC-21

LIFE CARE CENTER OF VISTA

304 N MELROSE DR
VISTA, CA 92083
(760) 724-8222
Effective as of 01-JAN-12

RANCHO VISTA

760 E BOBIER DR
VISTA, CA 92084
(760) 941-1480
Effective as of 01-FEB-13

VISTA HEALTHCARE CENTER

247 E BOBIER DR
VISTA, CA 92084
(760) 945-3033
Effective as of 01-OCT-13

VISTA KNOLL SPECIALIZED CARE FACILITY

2000 WESTWOOD RD
VISTA, CA 92083
(760) 630-2273
Effective as of 01-NOV-11
# D. Blue Shield Promise Medi-Cal 網路內提供者清單

## D1. 具備聯邦資質的健康診所

<table>
<thead>
<tr>
<th>ALPINE</th>
</tr>
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</table>
| **SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE**  
Provider ID: 517802  
1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103  
Phone: 619-445-6200  
After Hours Phone: 619-445-6200  
License Number: 20A17296  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  
Website: www.mtnhealth.org |

| **SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE**  
Provider ID: 517802  
1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103  
Phone: 619-662-4100  
After Hours Phone: 619-662-4100  
License Number: 90000681  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  
Website: www.mtnhealth.org |

| **SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE**  
Provider ID: 517802  
1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103  
Phone: 619-662-4100  
After Hours Phone: 619-662-4100  
License Number: A158569  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  
Website: www.mtnhealth.org |

| **SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE**  
Provider ID: 517802  
1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103  
Phone: 619-662-4100  
After Hours Phone: 619-662-4100  
License Number: NP95005999  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  
Website: www.mtnhealth.org |

| **SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE**  
Provider ID: 517802  
1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103  
Phone: 619-662-4100  
After Hours Phone: 619-662-4100  
License Number: A97270  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE  
Website: www.mtnhealth.org |
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Provider ID: 517802
1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: PA20490
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Provider ID: 517802
1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: CA28315
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Provider ID: 517802
1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: PA52347
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Provider ID: 517802
1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: DC2835
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Provider ID: 517802
1620 ALPINE BLVD STE 110
ALPINE, CA 91901-1103
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: DC28335
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE
Website: www.mtnhealth.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

FAMILY MEDICINE
Website: www.mtnhealth.org

SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE
Provider ID: 517802
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
Fax: (619) 320-3347
After Hours Phone: (619) 662-4100
License Number: 090000681
NPI: 1770124315
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Norwegian, Spanish, Swedish
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.mtnhealth.org

License Number: A131678
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480120
1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-950
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: A49273
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480120
1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-950
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: A93248
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480120
1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-950
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: G74757
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

**TRUERCARE**
Provider ID: 480120
1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
Phone: 760-736-6767
Fax: 760-720-7204
After Hours Phone: 760-736-6767
License Number: 80000630
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

**TRUECARE**
Provider ID: 480120
1295 CARLSBAD VILLAGE DR, STE 100
CARLSBAD, CA 92008-1950
Phone: 760-736-6767
Fax: 760-720-7204
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

**CHULA VISTA**

**CHULA VISTA FAMILY HLTH CTR**
Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: PT37189
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

CHULA VISTA, CA 91910-2628
📞 Phone: 619-515-2500
Fax: 619-397-1161
⏰ After Hours Phone: 619-515-2500
NPI: 1134155377
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
𝛓 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
🌐 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
📍 251 LANDIS AVE
CHULA VISTA, CA 91910-2628
📞 Phone: 619-515-2500
⏰ After Hours Phone: 619-515-2500
License Number: PT294245
NPI: 1134155377
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
𝛓 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
🌐 Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
📍 251 LANDIS AVE
CHULA VISTA, CA 91910-2628
📞 Phone: 619-515-2500
⏰ After Hours Phone: 619-515-2500
License Number: PT295173
NPI: 1134155377
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
𝛓 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
🌐 Website: www.fhcsd.org

American Sign Language (ASL): N
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

NPI: 1134155377
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: NP95013978
NPI: 1134155377
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: PT291706
NPI: 1134155377
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA 91910-2628
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: PT292823
NPI: 1134155377
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
Website: www.fhcsd.org

Your PCP's providers may have network-authorized mental health services providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require prior authorization by the mental health provider, then the service can be covered.

For access to the provider list, please visit blueshieldca.com/fad.
<table>
<thead>
<tr>
<th>Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR</th>
<th>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></th>
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<tr>
<td>Provider ID: 206355</td>
<td>Phone: 619-515-2500</td>
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<tr>
<td>251 LANDIS AVE, CHULA VISTA, CA 91910-2628</td>
<td>After Hours Phone: 619-515-2500</td>
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<tr>
<td>License Number: PT293536</td>
<td>NPI: 134355537</td>
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<tr>
<th>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</th>
<th>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></th>
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<tr>
<td>Provider ID: 427322</td>
<td>Phone: 619-662-4100</td>
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<tr>
<td>678 3RD AVE, CHULA VISTA, CA 91910-5736</td>
<td>After Hours Phone: 619-662-4100</td>
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<tr>
<td>License Number: 20A12555</td>
<td>NPI: 1598122871</td>
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<td>Provider ID: 427322</td>
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<tr>
<td>678 3RD AVE, CHULA VISTA, CA 91910-5736</td>
<td>After Hours Phone: 619-662-4100</td>
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<tr>
<td>License Number: 20A13225</td>
<td>NPI: 1598122871</td>
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<td>678 3RD AVE, CHULA VISTA, CA 91910-5736</td>
<td>After Hours Phone: 619-662-4100</td>
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<tr>
<td>License Number: 20A14025</td>
<td>NPI: 1598122871</td>
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<td>Cultural Competency: No</td>
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<td>American Sign Language (ASL): N</td>
<td>Accessibility: CONTACT PROVIDER</td>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
Website: [www.fhcsd.org](http://www.fhcsd.org)

CHULA VISTA FAMILY HLTH CTR

| Provider ID: 206355 | Phone: 619-515-2500 |
| 251 LANDIS AVE, CHULA VISTA, CA 91910-2628 | After Hours Phone: 619-515-2500 |
| License Number: PT293536 | NPI: 1134155377 |
| Accepting New Patients: Yes | Site English Spoken: Yes |
| Site Languages(s) Spoken: Spanish | Cultural Competency: No |
| American Sign Language (ASL): N | Accessibility: CONTACT PROVIDER |

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<th>Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA</th>
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<td>678 3RD AVE, CHULA VISTA, CA 91910-5736</td>
<td>After Hours Phone: 619-662-4100</td>
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<tr>
<td>License Number: 20A13225</td>
<td>NPI: 1598122871</td>
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<td>Provider ID: 427322</td>
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<td>678 3RD AVE, CHULA VISTA, CA 91910-5736</td>
<td>After Hours Phone: 619-662-4100</td>
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<tr>
<td>License Number: 20A14025</td>
<td>NPI: 1598122871</td>
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<tr>
<td>Accepting New Patients: Yes</td>
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<td>Site Languages(s) Spoken: Spanish</td>
<td>Cultural Competency: No</td>
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<td>American Sign Language (ASL): N</td>
<td>Accessibility: CONTACT PROVIDER</td>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A19485
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A9060
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A106103
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A114600
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A115598
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
### D. Blue Shield Promise Medi-Cal 網絡內提供者清單

#### D1. 具備聯邦資質的健康診所

<table>
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<tr>
<th>SAN YSIDRO HEALTH CHULA VISTA</th>
<th>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></th>
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<td>Provider ID: 427322</td>
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<td>678 3RD AVE</td>
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<td>CHULA VISTA, CA</td>
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<tr>
<td>91910-5736</td>
<td></td>
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<tr>
<td>Phone: 619-662-4100</td>
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<td>After Hours Phone: 619-662-4100</td>
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<td>License Number: A115699</td>
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<td>NPI: 1598122871</td>
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<td>Site English Spoken: Yes</td>
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<td>Cultural Competency: No</td>
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<td>American Sign Language (ASL):</td>
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<td>Accessibility: CONTACT PROVIDER</td>
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</table>
| Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA | Website: [www.ihpsocal.org](http://www.ihpsocal.org)
| Provider ID: 427322           |                                                       |
| 678 3RD AVE                   |                                                       |
| CHULA VISTA, CA               |                                                       |
| 91910-5736                    |                                                       |
| Phone: 619-662-4100           |                                                       |
| After Hours Phone: 619-662-4100 |                                                   |
| License Number: A120672       |                                                       |
| NPI: 1598122871               |                                                       |
| Accepting New Patients: Yes   |                                                       |
| Site English Spoken: Yes      |                                                       |
| Cultural Competency: No       |                                                       |
| American Sign Language (ASL): | N                                                      |
| Accessibility: CONTACT PROVIDER |                                              |
| Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA | Website: [www.ihpsocal.org](http://www.ihpsocal.org)
| Provider ID: 427322           |                                                       |
| 678 3RD AVE                   |                                                       |
| CHULA VISTA, CA               |                                                       |
| 91910-5736                    |                                                       |
| Phone: 619-662-4100           |                                                       |
| After Hours Phone: 619-662-4100 |                                                   |
| License Number: A121861       |                                                       |
| NPI: 1598122871               |                                                       |
| Accepting New Patients: Yes   |                                                       |
| Site English Spoken: Yes      |                                                       |
| Cultural Competency: No       |                                                       |
| American Sign Language (ASL): | N                                                      |
| Accessibility: CONTACT PROVIDER |                                              |
| Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA | Website: [www.ihpsocal.org](http://www.ihpsocal.org)
| Provider ID: 427322           |                                                       |
| 678 3RD AVE                   |                                                       |
| CHULA VISTA, CA               |                                                       |
| 91910-5736                    |                                                       |
| Phone: 619-662-4100           |                                                       |
| After Hours Phone: 619-662-4100 |                                                   |
| License Number: A123492       |                                                       |
| NPI: 1598122871               |                                                       |
| Accepting New Patients: Yes   |                                                       |
| Site English Spoken: Yes      |                                                       |
| Cultural Competency: No       |                                                       |
| American Sign Language (ASL): | N                                                      |
| Accessibility: CONTACT PROVIDER |                                              |
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

- **SAN YSIDRO HEALTH CHULA VISTA**
  - Provider ID: 427322
  - 678 3RD AVE CHULA VISTA, CA 91910-5736
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: A123604
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N

- **SAN YSIDRO HEALTH CHULA VISTA**
  - Provider ID: 427322
  - 678 3RD AVE CHULA VISTA, CA 91910-5736
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: A134303
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N

- **SAN YSIDRO HEALTH CHULA VISTA**
  - Provider ID: 427322
  - 251 LANDIS AVE CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: 20A14919
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N

- **CHULA VISTA FAMILY HLTH CTR**
  - Provider ID: 206355
  - 251 LANDIS AVE CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: 20A17807
  - NPI: 0885949541
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N

- **CHULA VISTA FAMILY HLTH CTR**
  - Provider ID: 206355
  - 251 LANDIS AVE CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: 20A17807
  - NPI: 0885949541
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N

- **CHULA VISTA FAMILY HLTH CTR**
  - Provider ID: 206355
  - 251 LANDIS AVE CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: 20A17807
  - NPI: 0885949541
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N

- **CHULA VISTA FAMILY HLTH CTR**
  - Provider ID: 206355
  - 251 LANDIS AVE CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: 20A17807
  - NPI: 0885949541
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N

- **CHULA VISTA FAMILY HLTH CTR**
  - Provider ID: 206355
  - 251 LANDIS AVE CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: 20A17807
  - NPI: 0885949541
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA
91910-2628
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA
91910-2628
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA
91910-2628
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: A119689
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
251 LANDIS AVE
CHULA VISTA, CA
91910-2628
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **CHULA VISTA FAMILY HLTH CTR**
  - Provider ID: 206355
  - 251 LANDIS AVE
  - CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: A154298
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  - Website: www.fhcsd.org

- **CHULA VISTA FAMILY HLTH CTR**
  - Provider ID: 206355
  - 251 LANDIS AVE
  - CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: A153344
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  - Website: www.fhcsd.org

- **CHULA VISTA FAMILY HLTH CTR**
  - Provider ID: 206355
  - 251 LANDIS AVE
  - CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: A163464
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  - Website: www.fhcsd.org

- **CHULA VISTA FAMILY HLTH CTR**
  - Provider ID: 206355
  - 251 LANDIS AVE
  - CHULA VISTA, CA 91910-2628
  - Phone: 619-515-2500
  - After Hours Phone: 619-515-2500
  - License Number: A164859
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  - Website: www.fhcsd.org

Please note, certain services may require approval from the Mental Health Provider before being covered by Blue Shield.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **CHULA VISTA FAMILY HLTH CTR**
  Provider ID: 206355
  251 LANDIS AVE
  CHULA VISTA, CA 91910-2628
  Phone: 619-515-2500
  After Hours Phone: 619-515-2500
  License Number: A178499
  NPI: 1134155377
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Site Languages(s) Spoken: Spanish
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  Website: www.fhcsd.org

- **CHULA VISTA FAMILY HLTH CTR**
  Provider ID: 206355
  251 LANDIS AVE
  CHULA VISTA, CA 91910-2628
  Phone: 619-515-2500
  After Hours Phone: 619-515-2500
  License Number: A72005
  NPI: 1134155377
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Site Languages(s) Spoken: Spanish
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  Website: www.fhcsd.org

- **CHULA VISTA FAMILY HLTH CTR**
  Provider ID: 206355
  251 LANDIS AVE
  CHULA VISTA, CA 91910-2628
  Phone: 619-515-2500
  After Hours Phone: 619-515-2500
  License Number: A78355
  NPI: 1134155377
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Site Languages(s) Spoken: Spanish
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  Website: www.fhcsd.org

Your PCP’s doctor group may have its own network provider for mental health services. Please refer to the list below. You can contact these providers directly. Please note, some services may require mental health services providers to obtain Blue Shield prior authorization, then the service will be covered.

To get online mental health services provider list, please visit blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
_publish:251 LANDIS AVE
  CHULA VISTA, CA 91910-2628
  Phone: 619-515-2500
  After Hours Phone: 619-515-2500
  License Number: C174771
  NPI: 1134155377
Accepting New Patients: Yes
| Site English Spoken: Yes |
| Site Languages(s) Spoken: Spanish |
| Cultural Competency: No |
| American Sign Language (ASL): N |
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
_publish:251 LANDIS AVE
  CHULA VISTA, CA 91910-2628
  Phone: 619-515-2500
  After Hours Phone: 619-515-2500
  License Number: DPM4819
  NPI: 1134155377
Accepting New Patients: Yes
| Site English Spoken: Yes |
| Site Languages(s) Spoken: Spanish |
| Cultural Competency: No |
| American Sign Language (ASL): N |
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
_publish:251 LANDIS AVE
  CHULA VISTA, CA 91910-2628
  Phone: 619-515-2500
  After Hours Phone: 619-515-2500
  License Number: NM792
  NPI: 1134155377
Accepting New Patients: Yes
| Site English Spoken: Yes |
| Site Languages(s) Spoken: Spanish |
| Cultural Competency: No |
| American Sign Language (ASL): N |
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: CHULA VISTA FAMILY HLTH CTR
  Website: www.fhcsd.org

CHULA VISTA FAMILY HLTH CTR
Provider ID: 206355
_publish:251 LANDIS AVE
  CHULA VISTA, CA 91910-2628
  Phone: 619-515-2500
  After Hours Phone: 619-515-2500
  License Number: G78814
  NPI: 1134155377
Accepting New Patients: Yes
### D. Blue Shield Promise Medi-Cal 網絡內提供者清單

#### D1. 具備聯邦資質的健康診所

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<td>427322</td>
<td>678 3RD AVE CHULA VISTA, CA 91910-5736</td>
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<td>619-662-4100</td>
<td>A138474</td>
<td>1134155377</td>
<td>Yes</td>
<td>Yes</td>
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<td>SAN YSIDRO HEALTH CHULA VISTA</td>
<td><a href="http://www.sanysidro.org">www.sanysidro.org</a></td>
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<td>427322</td>
<td>678 3RD AVE CHULA VISTA, CA 91910-5736</td>
<td>619-662-4100</td>
<td>619-662-4100</td>
<td>A138534</td>
<td>1598122871</td>
<td>Yes</td>
<td>Yes</td>
<td>Spanish</td>
<td>No</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>SAN YSIDRO HEALTH CHULA VISTA</td>
<td><a href="http://www.sanysidro.org">www.sanysidro.org</a></td>
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<td>427322</td>
<td>678 3RD AVE CHULA VISTA, CA 91910-5736</td>
<td>619-662-4100</td>
<td>619-662-4100</td>
<td>A162816</td>
<td>1598122871</td>
<td>Yes</td>
<td>Yes</td>
<td>Spanish</td>
<td>No</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>SAN YSIDRO HEALTH CHULA VISTA</td>
<td><a href="http://www.sanysidro.org">www.sanysidro.org</a></td>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A163183
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A177922
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A164392
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A40061
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A41486
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A40473
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **Site English Spoken:** Yes
- **Cultural Competency:** No
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Medical Group/IPA:** SAN YSIDRO HEALTH CHULA VISTA
- **Website:** www.ihpsocal.org

**SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100
After Hours Phone: 619-662-4100

License Number: A47906
NPI: 1598122871

Accepting New Patients: Yes

- **Site English Spoken:** Yes
- **Cultural Competency:** No
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Medical Group/IPA:** SAN YSIDRO HEALTH CHULA VISTA
- **Website:** www.ihpsocal.org

**SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100
After Hours Phone: 619-662-4100

License Number: A56153
NPI: 1598122871

Accepting New Patients: Yes

- **Site English Spoken:** Yes
- **Cultural Competency:** No
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Medical Group/IPA:** SAN YSIDRO HEALTH CHULA VISTA
- **Website:** www.ihpsocal.org

**SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100
After Hours Phone: 619-662-4100

License Number: A69264
NPI: 1598122871

Accepting New Patients: Yes

- **Site English Spoken:** Yes
- **Cultural Competency:** No
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Medical Group/IPA:** SAN YSIDRO HEALTH CHULA VISTA
- **Website:** www.ihpsocal.org

**SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

678 3RD AVE
CHULA VISTA, CA
91910-5736

Phone: 619-662-4100
After Hours Phone: 619-662-4100

License Number: A66903
NPI: 1598122871

Accepting New Patients: Yes

- **Site English Spoken:** Yes
- **Cultural Competency:** No
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Medical Group/IPA:** SAN YSIDRO HEALTH CHULA VISTA
- **Website:** www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A77936
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A87650
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: C55563
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: DC31963
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A93785
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

### D1. 具備聯邦資質的健康診所

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Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

<table>
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<tr>
<th>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></th>
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<th>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></th>
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<tr>
<td>678 3RD AVE</td>
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<tr>
<td>91910-5736</td>
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<td>Phone: 619-662-4100</td>
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Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA

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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: G72486
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: G80234
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: NP12112
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: NP95015413
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA
91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: PA54404
NPI: 1598122871
Accepting New Patients: Yes
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: SP18192
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHULA VISTA
Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS
Provider ID: 482034
855 3RD AVE STE 2200
CHULA VISTA, CA 91911-1353
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A49591
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA PEDIATRICS
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA 91910-5736
Phone: 619-662-4100
Fax: 619-425-1184

CHULA VISTA PEDIATRICS
Provider ID: 482034
855 3RD AVE STE 2200
CHULA VISTA, CA 91911-1353
Phone: 619-662-4100
Fax: 619-662-4196

619-662-4100
License Number: A82912
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHULA VISTA PEDIATRICS
Website: www.ihpsocal.org

CHULA VISTA PEDIATRICS
Provider ID: 482034
855 3RD AVE STE 2200
CHULA VISTA, CA 91911-1353
Phone: 619-662-4100
Fax: 619-662-4196

803
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- After Hours Phone: 619-662-4100
  NPI: 1598122871
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: CHULA VISTA PEDIATRICS
  Website: www.ihpsocal.org

FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
Provider ID: 417641
  352 L ST
  CHULA VISTA, CA
  91911-1208
  Phone: 619-515-2325
  After Hours Phone: 619-515-2325
  License Number: PA19306
  NPI: 1134155377
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
  Website: www.fhcsd.org

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC
Provider ID: 417641
  352 L ST
  CHULA VISTA, CA
  91911-1208
  Phone: 619-515-2325
  After Hours Phone: 619-515-2325
  License Number: PA19306
  NPI: 1134155377
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
  Website: www.fhcsd.org

FAMILY HLTH CTR SAN
DIEGO-RICE FAM HC
Provider ID: 417641
  352 L ST
  CHULA VISTA, CA
  91911-1208
  Phone: 619-515-2325
  After Hours Phone: 619-515-2325
  License Number: PA19306
  NPI: 1134155377
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
  Website: www.fhcsd.org

DIEGO-RICE FAM HC
Provider ID: 417641
  352 L ST
  CHULA VISTA, CA
  91911-1208
  Phone: 619-515-2325
  Fax: 619-420-0660
  After Hours Phone: 619-515-2325
  License Number: 5500023055
  NPI: 1134155377
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-RICE FAM HC
  Website: www.fhcsd.org

OTAY FAMILY HEALTH CLINIC
Provider ID: 314546
  1637 3RD AVE STE H
  CHULA VISTA, CA
  91911-5823
  Phone: 619-205-1360
  After Hours Phone: 619-205-1360
  License Number: A95959
  NPI: 1598122871
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: OTAY FAMILY HEALTH CLINIC
  Website: www.fhcsd.org

804
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC
Provider ID: 314546
1637 3RD AVE STE H
CHULA VISTA, CA 91911-5823
Phone: 619-205-1376
After Hours Phone: 619-205-1376
License Number: A179598
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OTAY FAMILY HEALTH CLINIC
Website: www.ihpsocal.org

Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC
Provider ID: 314546
1637 3RD AVE STE H
CHULA VISTA, CA 91911-5823
Phone: 619-662-4100
Fax: 619-336-2323
After Hours Phone: 619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OTAY FAMILY HEALTH CLINIC
Website: www.ihpsocal.org

Website: www.ihpsocal.org

OTAY FAMILY HEALTH CLINIC
Provider ID: 314546
1637 3RD AVE STE H
CHULA VISTA, CA 91911-5823
Phone: 619-662-4100
Fax: 619-336-2323
After Hours Phone: 619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OTAY FAMILY HEALTH CLINIC
Website: www.ihpsocal.org

Website: www.ihpsocal.org

FAMILY HLTH CTR SAN DIEGO–RICE FAM HC
Provider ID: 417641
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
Fax: (619) 420-0660
After Hours Phone: (619) 515-2325
License Number: 550002305
NPI: 1083959464
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 9:00AM-4:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal–PHP
Website: www.ihpsocal.org

Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHULA VISTA
Provider ID: 427322
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-6941
After Hours Phone: (619) 662-4100
NPI: 1326486861
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal–PHP
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **Site English Spoken**: Y
- **Site Languages(s) Spoken**: Spanish, Tagalog
- **Cultural Competency**: Y
- **Hours**: M-F 8:00AM-5:00PM, SA 8:00AM-4:00PM
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Medical Group/IPA**: IHP of Southern Cal-PHP
- **Website**: www.syhealth.org/clinics/chula-vista-medic-al-plaza

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE
CHULA VISTA, CA 91910

Phone: (619) 515-2500
Fax: (619) 397-1161
After Hours Phone: (619) 515-2500
NPI: 1346480837

Accepting New Patients: Yes
Min/Max Age: 0\150

- **Site English Spoken**: Y
- **Site Languages(s) Spoken**: Spanish
- **Cultural Competency**: Y
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Medical Group/IPA**: Family Health Centers of San Diego
- **Website**: www.fhcsd.org
- **Email**: MARTHAO@FHCSD.ORG

### EL CAJON

**LA MAESTRA FAMILY CLINIC INC**

Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019-4795
Phone: 619-312-0348
After Hours Phone: 619-312-0348
License Number: G45632
NPI: 1609849074

Accepting New Patients: Yes
- **Site English Spoken**: Yes
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Medical Group/IPA**: LA MAESTRA FAMILY CLINIC INC
- **Website**: www.lamaestra.org

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019-4795
Phone: 619-312-0347
After Hours Phone: 619-312-0347
License Number: PA58466
NPI: 1609849074

Accepting New Patients: Yes
- **Site English Spoken**: Yes
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Medical Group/IPA**: LA MAESTRA FAMILY CLINIC INC
- **Website**: www.lamaestra.org

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

165 S 1ST ST
EL CAJON, CA 92019-4795
Phone: 619-312-0347
After Hours Phone: 619-312-0347
License Number: PA58466
NPI: 1609849074

Accepting New Patients: Yes
- **Site English Spoken**: Yes
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Medical Group/IPA**: LA MAESTRA FAMILY CLINIC INC
- **Website**: www.lamaestra.org

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<td>1609849074</td>
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<td>875 EL CAJON BLVD EL CAJON, CA 92020-5714</td>
<td>619-662-4100</td>
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<td>20A10964</td>
<td>1598122871</td>
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<td>20A10964</td>
<td>1598122871</td>
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<td>1598122871</td>
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<td>CONTACT PROVIDER</td>
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<td>20A10964</td>
<td>1598122871</td>
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<td>619-662-4100</td>
<td>20A10964</td>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **SAN YSIDRO HEALTH EL CAJON**
  - **Provider ID:** 569910
  - **Address:** 875 EL CAJON BLVD, EL CAJON, CA 92020-5714
  - **Phone:** 619-662-4100
  - **After Hours Phone:** 619-662-4100
  - **License Number:** A101888
  - **NPI:** 1598122871
  - **Accepting New Patients:** Yes
  - **Site English Spoken:** Yes
  - **Site Languages(s) Spoken:** Spanish, Tagalog
  - **Cultural Competency:** No
  - **American Sign Language (ASL):** N
  - **Accessibility:** CONTACT PROVIDER
  - **Medical Group/IPA:** SAN YSIDRO HEALTH EL CAJON
  - **Website:** N/A

- **SAN YSIDRO HEALTH EL CAJON**
  - **Provider ID:** 569910
  - **Address:** 875 EL CAJON BLVD, EL CAJON, CA 92020-5714
  - **Phone:** 619-662-4100
  - **After Hours Phone:** 619-662-4100
  - **License Number:** A127706
  - **NPI:** 1598122871
  - **Accepting New Patients:** Yes
  - **Site English Spoken:** Yes
  - **Site Languages(s) Spoken:** Spanish, Tagalog
  - **Cultural Competency:** No
  - **American Sign Language (ASL):** N
  - **Accessibility:** CONTACT PROVIDER
  - **Medical Group/IPA:** SAN YSIDRO HEALTH EL CAJON
  - **Website:** N/A

- **SAN YSIDRO HEALTH EL CAJON**
  - **Provider ID:** 569910
  - **Address:** 875 EL CAJON BLVD, EL CAJON, CA 92020-5714
  - **Phone:** 619-662-4100
  - **After Hours Phone:** 619-662-4100
  - **License Number:** A131365
  - **NPI:** 1598122871
  - **Accepting New Patients:** Yes
  - **Site English Spoken:** Yes
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  - **Cultural Competency:** No
  - **American Sign Language (ASL):** N
  - **Accessibility:** CONTACT PROVIDER
  - **Medical Group/IPA:** SAN YSIDRO HEALTH EL CAJON
  - **Website:** N/A

- **SAN YSIDRO HEALTH EL CAJON**
  - **Provider ID:** 569910
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  - **Phone:** 619-662-4100
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  - **Accepting New Patients:** Yes
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  - **Cultural Competency:** No
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  - **Accessibility:** CONTACT PROVIDER
  - **Medical Group/IPA:** SAN YSIDRO HEALTH EL CAJON
  - **Website:** N/A

**Website:** N/A
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

- **SAN YSIDRO HEALTH EL CAJON**
  - Provider ID: 569910
  - 875 EL CAJON BLVD
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: A47906
  - NPI: 1598122871
  - Accepting New Patients: Yes
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  - Cultural Competency: No
  - American Sign Language (ASL): N

- **SAN YSIDRO HEALTH EL CAJON**
  - Provider ID: 569910
  - 875 EL CAJON BLVD
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: A87650
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
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  - American Sign Language (ASL): N

- **SAN YSIDRO HEALTH EL CAJON**
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  - American Sign Language (ASL): N

- **SAN YSIDRO HEALTH EL CAJON**
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  - 875 EL CAJON BLVD
  - Phone: 619-662-4100
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  - American Sign Language (ASL): N

Access to Blue Shield Promise Medi-Cal network providers is available. Please consult the provider list below. You may contact these providers directly. Please note, some services may require prior authorization from the Blue Shield network provider for coverage.

For online access to the provider list, please visit blueshieldca.com/fad.
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**D. Blue Shield Promise Medi-Cal 網絡內提供者清單**

**D1. 具備聯邦資質的健康診所**

- **CAJON**
  - Provider ID: 569910
  - Address: 875 EL CAJON BLVD EL CAJON, CA 92020-5714
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: G43179
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish, Tagalog
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
  - Website: N/A

- **SAN YSIDRO HEALTH EL CAJON**
  - Provider ID: 569910
  - Address: 875 EL CAJON BLVD EL CAJON, CA 92020-5714
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: NP95012943
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish, Tagalog
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
  - Website: N/A

- **SAN YSIDRO HEALTH EL CAJON**
  - Provider ID: 569910
  - Address: 875 EL CAJON BLVD EL CAJON, CA 92020-5714
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: PT40025
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish, Tagalog
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
  - Website: N/A

- **LA MAESTRA CHC EL CAJON BROADWAY**
  - Provider ID: 418501
  - Address: 1032 BROADWAY EL CAJON, CA 92021-7416
  - Phone: 619-795-5991
  - After Hours Phone: 619-795-5991
  - License Number: 20A14222
  - NPI: 1609849074
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
  - Website: N/A

- **SAN YSIDRO HEALTH EL CAJON**
  - Provider ID: 569910
  - Address: 875 EL CAJON BLVD EL CAJON, CA 92020-5714
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: PT42665
  - NPI: 1598122871
  - Accepting New Patients: Yes
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  - Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
  - Website: N/A

- **LA MAESTRA CHC EL CAJON BROADWAY**
  - Provider ID: 418501
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  - Phone: 619-795-5991
  - After Hours Phone: 619-795-5991
  - License Number: 20A14222
  - NPI: 1609849074
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH EL CAJON
  - Website: N/A
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

**LA MAESTRA CHC EL CAJON BROADWAY**
Provider ID: 418501
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: 619-795-5991
After Hours Phone: 619-795-5991
License Number: 20A6433
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**LA MAESTRA CHC EL CAJON BROADWAY**
Provider ID: 418501
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: 619-795-5991
After Hours Phone: 619-795-5991
License Number: A160760
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**LA MAESTRA CHC EL CAJON BROADWAY**
Provider ID: 418501
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: 619-795-5991
After Hours Phone: 619-795-5991
License Number: A123929
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**LA MAESTRA CHC EL CAJON BROADWAY**
Provider ID: 418501
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: 619-795-5991
After Hours Phone: 619-795-5991
License Number: G50634
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**LA MAESTRA CHC EL CAJON BROADWAY**
Provider ID: 418501
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: 619-795-5991
After Hours Phone: 619-795-5991
License Number: PA21625
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**LA MAESTRA CHC EL CAJON BROADWAY**
Provider ID: 418501
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: 619-795-5991
After Hours Phone: 619-795-5991
License Number: G50634
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

LA MAESTRA CHC EL CAJON BROADWAY
Provider ID: 418501
1032 BROADWAY
EL CAJON, CA 92021-7416
Phone: 619-795-5991
Fax: 619-795-5992
After Hours Phone: 619-795-5991
License Number: PA58466
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA CHC EL CAJON BROADWAY
Website: www.lamaestra.org

CHASE AVENUE FAMILY HEALTH CTRS INC
Provider ID: 206354
1111 W CHASE AVE
EL CAJON, CA 92020-5710
Phone: 619-515-2499
After Hours Phone: 619-515-2499
License Number: 20A13700
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CHASE AVENUE FAMILY HEALTH CTRS INC
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

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<td></td>
<td></td>
</tr>
<tr>
<td>Accessibility: CONTACT PROVIDER</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Medical Group/IPA: CHASE
AVENUE FAMILY HEALTH
CTRS INC
Website: www.fhcsd.org

FAMILY HLTH CTR SAN
DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: PT293536
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN
DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: 20A13060
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN
DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN
DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: 20A7241
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A107093
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E/main st
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

Website: www.blueshieldca.com/fad

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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A134303
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A144974
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A146838
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

Website: www.fhcsd.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

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D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A152462
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A164859
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: A175325
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A178499
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A72005
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A83390
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A83390
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A83390
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A83390
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A83390
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A83390
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A83390
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A83390
NPI: 1134155377
Accepting New Patients: Yes

- Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
  - Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340

525 E MAIN ST
EL CAJON, CA 92020-4007

Phone: 619-515-2498
After Hours Phone: 619-515-2498

License Number: A83390
NPI: 1134155377
Accepting New Patients: Yes
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN

DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: DC33150
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

CAJON

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: NP95000205
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: NP95009180
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: NP95009292
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: PA20396
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: PT295173
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-EL CAJON
Provider ID: 418340
525 E MAIN ST
EL CAJON, CA 92020-4007
Phone: 619-515-2498
After Hours Phone: 619-515-2498
License Number: RN810863
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
Website: www.fhcsd.org

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

**FAMILY HLTH CTR SAN DIEGO-EL CAJON**
Provider ID: 418340

- Phone: 619-515-2498
- Fax: 619-269-0191
- After Hours Phone: 619-515-2498
- License Number: 20A19473
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-EL CAJON
- Website: www.fhcsd.org

**CENTRO MEDICO EL CAJON**
Provider ID: 478971

- Phone: 619-401-0404
- After Hours Phone: 619-401-0404
- License Number: A158569
- NPI: 1134144165
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: CENTRO MEDICO EL CAJON
- Website: N/A
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

CENTRO MEDICO EL CAJON
Provider ID: 478971
133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
Phone: 619-401-0404
After Hours Phone: 619-401-0404
License Number: A98486
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
Website: N/A

CENTRO MEDICO EL CAJON
Provider ID: 478971
133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
Phone: 619-401-0404
After Hours Phone: 619-401-0404
License Number: NP95001710
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
Website: N/A

CENTRO MEDICO EL CAJON
Provider ID: 478971
133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
Phone: 619-401-0404
After Hours Phone: 619-401-0404
License Number: A113241
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
Website: N/A

Phone: 619-873-8940
After Hours Phone: 619-873-8940
License Number: A114674
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
Website: N/A

CENTRO MEDICO EL CAJON
Provider ID: 478971
133 W MAIN ST STE 100
EL CAJON, CA 92020-3325
Phone: 619-873-8940
After Hours Phone: 619-873-8940
License Number: A114674
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
Website: N/A

Phone: 619-873-8940
After Hours Phone: 619-873-8940
License Number: A113241
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: CENTRO MEDICO EL CAJON
Website: N/A

Website: N/A
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

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<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
<th>License Number</th>
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<th>Site English Spoken</th>
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<th>Accessibility</th>
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<td>N/A</td>
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<td>Yes</td>
<td>Yes</td>
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<td>CENTRO MEDICO EL CAJON</td>
<td>N/A</td>
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<tr>
<td>LA MAESTRA FAMILY CLINIC INC</td>
<td>165 S 1ST ST</td>
<td>619-312-0347</td>
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<td>20A14222</td>
<td>1609849074</td>
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<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>CONTACT PROVIDER</td>
<td>LA MAESTRA FAMILY CLINIC INC</td>
<td>N/A</td>
</tr>
</tbody>
</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **After Hours Phone**: (619) 515-2498
- **License Number**: 550003553
- **NPI**: 1932561198
- **Accepting New Patients**: Yes
- **Min/Max Age**: 0\150
- **Site English Spoken**: Y
- **Cultural Competency**: N
- **Hours**: M-F
  - 8:30AM-5:30PM
  - SA 8:30AM-5:30PM
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Medical Group/IPA**: Family Health Centers of San Diego
- **Website**: www.fhcsd.org
- **Email**: janellek@fhcsd.org

- **CHASE AVENUE FAMILY HEALTH CTRS INC**
  - **Provider ID**: 206354
  - **Address**: 1111 W CHASE AVE
    - EL CAJON, CA 92020
  - **Phone**: (619) 515-2499
  - **Fax**: (619) 593-7164
  - **After Hours Phone**: (619) 515-2499
  - **NPI**: 1104861681
  - **Accepting New Patients**: Yes
  - **Min/Max Age**: 0\150
  - **Site English Spoken**: Y
  - **Site Languages(s) Spoken**: Spanish
  - **Cultural Competency**: N
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER
  - **Medical Group/IPA**: La Maestra Family Clinic
  - **Website**: www.lamaestra.org
  - **Email**: iselaacho@borregohealth.org

- **CENTRO MEDICO EL CAJON**
  - **Provider ID**: 478971
  - **Address**: 133 W MAIN ST STE 100
    - EL CAJON, CA 92020
  - **Phone**: (619) 873-8940
  - **Fax**: (619) 401-0522
  - **After Hours Phone**: (619) 873-8940
  - **License Number**: 550000430
  - **NPI**: 1154480069
  - **Accepting New Patients**: Yes
  - **Min/Max Age**: 0\999
  - **Site English Spoken**: Y
  - **Cultural Competency**: Y
  - **Hours**: SU-SA
    - 8:00AM-8:00PM
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER
  - **Medical Group/IPA**: BORREGO COMMUNITY HEALTH
  - **Website**: www.syhealth.org
  - **Email**: jaquelinc@fhcsd.org

- **CHASE AVENUE FAMILY HEALTH CTRS INC**
  - **Provider ID**: 206354
  - **Address**: 1111 W CHASE AVE
    - EL CAJON, CA 92020
  - **Phone**: (619) 515-2499
  - **Fax**: (619) 593-7164
  - **After Hours Phone**: (619) 515-2499
  - **NPI**: 1104861681
  - **Accepting New Patients**: Yes
  - **Min/Max Age**: 0\150
  - **Site English Spoken**: Y
  - **Site Languages(s) Spoken**: Spanish
  - **Cultural Competency**: N
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER
  - **Medical Group/IPA**: La Maestra Family Clinic
  - **Website**: www.lamaestra.org
  - **Email**: iselaacho@borregohealth.org

- **SAN YSIDRO HEALTH EL CAJON**
  - **Provider ID**: 569910
  - **Address**: 875 EL CAJON BLVD
    - EL CAJON, CA 92020
  - **Phone**: (619) 662-4100
  - **Fax**: (619) 785-3356
  - **After Hours Phone**: (619) 662-4100
  - **License Number**: 550002514
  - **NPI**: 1568845741
  - **Accepting New Patients**: Yes
  - **Min/Max Age**: 0\150
  - **Site English Spoken**: Y
  - **Site Languages(s) Spoken**: Spanish, Arabic, Farsi, Russian, Latin
  - **Cultural Competency**: Y
  - **Hours**: M-F
    - 8:00AM-5:00PM
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER
  - **Medical Group/IPA**: IHP of Southern Cal-PHP
  - **Website**: www.syhealth.org

825
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185267
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
Fax: (619) 749-5480
After Hours Phone: (619) 312-0347
NPI: 1336353721
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: Y
Hours: M-TU 8:00AM-5:00PM
TH-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: La Maestra Family Clinic
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA19437
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: DC29074
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: NP21368
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

ENCINITAS
TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA19437
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: DC29074
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A

TRUECARE
Provider ID: 480243
1130 2ND ST ENCINITAS, CA 92024-5008
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: N/A
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

**PROVIDER**
Medical Group/IPA: TRUECARE
Website: N/A

**TRUECARE**
Provider ID: 480243

- 1130 2ND ST
  ENCINITAS, CA 92024-5008
- Phone: 760-753-7842
- After Hours Phone: 760-753-7842
- License Number: A103940
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**TRUECARE**
Provider ID: 480243

- 1130 2ND ST
  ENCINITAS, CA 92024-5008
- Phone: 760-753-7842
- After Hours Phone: 760-753-7842
- License Number: 80000638
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**TRUECARE**
Provider ID: 480243

- 1130 2ND ST
  ENCINITAS, CA 92024
- Phone: (760) 753-7842
- After Hours Phone: (760) 753-7842
- License Number: 080000638
- NPI: 1245246917
- Accepting New Patients: Yes
- Site English Spoken: Y
- Cultural Competency: N
- Hours: M-TH 8:00AM-5:00PM
  F 8:30AM-5:30PM

**TRUECARE**
Provider ID: 480243

- 1130 2ND ST
  ENCINITAS, CA 92024
- Phone: 760-753-7842
- Fax: 760-736-8740
- After Hours Phone: 760-753-7842
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**TRUECARE**
Provider ID: 480243

- 1130 2ND ST
  ENCINITAS, CA 92024
- Phone: (760) 753-7842
- Fax: (760) 736-8740
- After Hours Phone: (760) 753-7842
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**TRUECARE**
Provider ID: 480243

- 1130 2ND ST
  ENCINITAS, CA 92024
- Phone: (760) 753-7842
- Fax: (760) 736-8740
- After Hours Phone: (760) 753-7842
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Medical Group/IPA: IHP of Southern Cal-PHP

Website: N/A

**ESCONDIDO**

**NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL**

Provider ID: 424775

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: 760-690-5900

After Hours Phone: 760-690-5900

License Number: A62467

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Website: N/A

**SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**

Provider ID: 588941

704 E GRAND AVE

ESCONDIDO, CA 92025-4405

Phone: 619-662-4100

Fax: 619-662-7952

After Hours Phone: 619-662-4100

License Number: PA52347

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Website: N/A

**NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL**

Provider ID: 424775

426 N DATE ST

ESCONDIDO, CA 92025-3409

Phone: 760-690-5900

After Hours Phone: 760-690-5900

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Website: N/A

**SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**

Provider ID: 588941

704 E GRAND AVE

ESCONDIDO, CA 92025-4405

Phone: 619-662-4100

After Hours Phone: 619-662-4100

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Website: N/A
### D. Blue Shield Promise Medi-Cal 網絡內提供者清單

**D1. 具備聯邦資質的健康診所**

<table>
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<tr>
<th>FAMILY MEDICINE</th>
<th>Website: N/A</th>
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<tr>
<td><strong>SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE</strong></td>
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</tr>
<tr>
<td>Provider ID: 588941</td>
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</tr>
<tr>
<td>☑ 704 E GRAND AVE ESCONDIDO, CA 92025-4405</td>
<td></td>
</tr>
<tr>
<td>☑ Phone: 619-662-4100</td>
<td></td>
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<tr>
<td>☑ After Hours Phone: 619-662-4100</td>
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<td>Accepting New Patients: Yes</td>
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<td>☑ Website: N/A</td>
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<th><strong>SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE</strong></th>
<th>Website: N/A</th>
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<tr>
<td><strong>NEIGHBORHOOD HEALTHCARE ESCONDIDO</strong></td>
<td>Provider ID: 206270</td>
</tr>
<tr>
<td>☑ 460 N ELM ST ESCONDIDO, CA 92025-3002</td>
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</tr>
<tr>
<td>☑ Phone: 760-520-8100</td>
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<tr>
<td>☑ After Hours Phone: 760-520-8100</td>
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</tr>
<tr>
<td>License Number: A107557</td>
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<td>American Sign Language (ASL): N</td>
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<td>Accessibility: CONTACT PROVIDER</td>
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<tr>
<td>Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO</td>
<td></td>
</tr>
<tr>
<td>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
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</table>
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **460 N ELM ST**
  - ESCONDIDO, CA 92025-3002
  - Phone: 760-520-8100
  - After Hours Phone: 760-520-8100
  - License Number: A109655
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO
  - Website: www.ihpsocal.org

- **1001 E GRAND AVE**
  - ESCONDIDO, CA 92025-4604
  - Phone: 760-520-8200
  - Fax: 360-462-2749
  - After Hours Phone: 760-520-8200
  - License Number: 80000483
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GRAND AVE
  - Website: www.ihpsocal.org

- **1001 E GRAND AVE**
  - ESCONDIDO, CA 92025-4604
  - Phone: 760-520-8200
  - Fax: 360-462-2749
  - After Hours Phone: 760-520-8200
  - License Number: 80000397
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GRAND AVE
  - Website: www.ihpsocal.org

- **1001 E GRAND AVE**
  - ESCONDIDO, CA 92025-4604
  - Phone: 760-520-8200
  - Fax: 360-462-2749
  - After Hours Phone: 760-520-8200
  - License Number: PA51508
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GRAND AVE
  - Website: www.ihpsocal.org

如果您需要精神健康服務類比ɒ心境，請參閱下方的清單。您可直接聯絡該等提供商。請注意，某些服務可能需要精神健康服務提供商獲得Blue Shield的事先授權，之後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE GRAND AVE
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE GRAND AVE
Provider ID: 206269
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: 760-520-8200
Fax: 360-462-2749
After Hours Phone: 760-520-8200
License Number: A161074
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE GRAND AVE
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE GRAND AVE
Provider ID: 206269
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: 760-520-8200
After Hours Phone: 760-520-8200
License Number: A94128
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE GRAND AVE
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE GRAND AVE
Provider ID: 206269
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: 760-520-8200
After Hours Phone: 760-520-8200
License Number: 80000158
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE PARKWAY
Website: N/A

NEIGHBORHOOD
HEALTHCARE GRAND AVE
Provider ID: 206269
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: 760-520-8200
After Hours Phone: 760-520-8200
License Number: A101773
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE GRAND AVE
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE VALLEY

PARKWAY
Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: 760-737-6900
Fax: 360-462-2748
After Hours Phone: 760-737-6900
License Number: 80000158
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE VALLEY
Website: N/A

NEIGHBORHOOD
HEALTHCARE GRAND AVE
Provider ID: 206269
1001 E GRAND AVE
ESCONDIDO, CA 92025-4604
Phone: 760-520-8200
License Number: A161074
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE GRAND AVE
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GRAND AVE
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: 760-737-6900
After Hours Phone: 760-737-6900
License Number: NP8169
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: 760-737-6900
After Hours Phone: 760-737-6900
License Number: DPM5260
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA 92025-3052
Phone: 760-737-6900
After Hours Phone: 760-737-6900
License Number: A161074
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY
Website: www.ihpsocal.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
Phone: 760-737-6900
After Hours Phone:
760-737-6900
License Number: A94128
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
Website: N/A

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
Phone: 760-737-6900
After Hours Phone:
760-737-6900
License Number: A145349
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
Website: N/A

Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
Phone: 760-737-6900
After Hours Phone:
760-737-6900
License Number: A139490
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
Website: N/A

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY

Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA
92025-3052
Phone: 760-737-6900
After Hours Phone:
760-737-6900
License Number: A120348
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NEIGHBORHOOD
HEALTHCARE VALLEY
PARKWAY
Website: N/A

NEIGHBORHOOD
HEALTHCARE PEDS AND PRENATAL
Provider ID: 206266
425 N DATE ST
ESCONDIDO, CA
92025-3413
Phone: 760-520-8340
After Hours Phone: 760-520-8340
License Number: A67626
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDS AND PRENATAL
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE PEDIATRICS AND PRENATAL
Provider ID: 424775
426 N DATE ST
ESCONDIDO, CA
92025-3409
Phone: 760-690-5900
Fax: 360-462-2747
After Hours Phone: 760-690-5900
License Number: 550000511
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDIATRICS AND PRENATAL
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE PEDS AND PRENATAL
Provider ID: 206266
425 N DATE ST
ESCONDIDO, CA
92025-3413
Phone: 760-520-8340
Fax: 360-462-2752
After Hours Phone: 760-520-8340
NPI: 1598122871

PRENATAL
Provider ID: 206266
425 N DATE ST
ESCONDIDO, CA
92025-3413
Phone: 760-520-8340
After Hours Phone: 760-520-8340
License Number: A56054
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDIATRICS AND PRENATAL
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE PEDIATRICS AND PRENATAL
Provider ID: 424775
426 N DATE ST
ESCONDIDO, CA
92025-3409
Phone: 760-690-5900
After Hours Phone: 760-690-5900
License Number: NP4799
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PEDIATRICS AND PRENATAL
Website: N/A

Your PCP's doctor group may have its own network-based mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require that mental health service providers obtain Blue Shield's prior authorization before they can be covered.

If you want to access the mental health service provider list online, please visit blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Medical Group/IPA: NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL
/provider_id: 424775
/provider_address: 426 N DATE ST ESCONDIDO, CA 92025-3409
/provider_phone: 760-690-5900
/provider_fax: 360-462-2747
/provider_after_hours_phone: 760-690-5900
/license_number: A67626
/npi: 1598122871
/accepting_new_patients: Yes
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/asl: N
/accessibility: CONTACT PROVIDER

Medical Group/IPA: NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL
/provider_id: 206270
/provider_address: 460 N ELM ST ESCONDIDO, CA 92025-3002
/provider_phone: 760-520-8100
/provider_after_hours_phone: 760-520-8100
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/npi: 1598122871
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/site_english_spoken: Yes
/cultural_competency: No
/asl: N
/accessibility: CONTACT PROVIDER

Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO
/provider_id: 206270
/provider_address: 460 N ELM ST ESCONDIDO, CA 92025-3002
/provider_phone: 760-520-8100
/provider_after_hours_phone: 760-520-8100
/license_number: A45413
/npi: 1598122871
/accepting_new_patients: Yes
/site_english_spoken: Yes
/cultural_competency: No
/asl: N
/accessibility: CONTACT PROVIDER
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

 PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

 NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100
After Hours Phone: 760-520-8100

License Number: A61751
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

 NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100
After Hours Phone: 760-520-8100

License Number: A139490
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

 NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100
After Hours Phone: 760-520-8100

License Number: A152372
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

 NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100
After Hours Phone: 760-520-8100

License Number: A178116
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

 NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100
After Hours Phone: 760-520-8100

License Number: A119661
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

 NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100
After Hours Phone: 760-520-8100

License Number: A152372
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

 NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270

460 N ELM ST
ESCONDIDO, CA
92025-3002

Phone: 760-520-8100
After Hours Phone: 760-520-8100
D1. 具備聯邦資質的健康診所

License Number: A120771
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270
460 N ELM ST
ESCONDIDO, CA
92025-3002
Phone: 760-520-8100
Fax: 360-466-2745
After Hours Phone: 760-520-8100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270
460 N ELM ST
ESCONDIDO, CA
92025-3002
Phone: 760-520-8100
Fax: 360-466-2745
After Hours Phone: 760-520-8100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270
460 N ELM ST
ESCONDIDO, CA
92025-3002
Phone: 760-520-8100
Fax: 360-466-2745
After Hours Phone: 760-520-8100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270
460 N ELM ST
ESCONDIDO, CA
92025-3002
Phone: 760-520-8100
Fax: 360-466-2745
After Hours Phone: 760-520-8100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Provider ID: 206270
460 N ELM ST
ESCONDIDO, CA
92025-3002
Phone: 760-520-8100
Fax: 360-466-2745
After Hours Phone: 760-520-8100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE ESCONDIDO
Provider ID: 206270
460 N ELM ST ESCONDIDO, CA 92025-3002
Phone: 760-520-8100
After Hours Phone: 760-520-8100
License Number: A94128
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: NEIGHBORHOOD HEALTHCARE ESCONDIDO
Website: www.ihpsocal.org

CENTRO MEDICO ESCONDIDO
Provider ID: 419344
1121 E WASHINGTON AVE ESCONDIDO, CA 92025
Phone: (760) 871-0606
Fax: (858) 634-6918
After Hours Phone: (760) 871-0606
License Number: 550001260
NPI: 1023349883
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDATION
Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL
Provider ID: 424775
426 N DATE ST ESCONDIDO, CA 92025
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760) 690-5900
License Number: 550000511
NPI: 1437335353
Accepting New Patients: Yes
Min/Max Age: 0\21
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP of Southern Cal-PHP
Website: N/A

NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL
Provider ID: 206266
425 N DATE ST ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
NPI: 1265618185
Accepting New Patients: Yes
Min/Max Age: 0\21
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE VALLEY PARKWAY
Provider ID: 206271
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
Fax: (360) 462-2748
After Hours Phone: (760) 737-6900
License Number: 080000158
NPI: 1720264641
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE
Provider ID: 588941
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (619) 662-7952
After Hours Phone: (619) 662-4100
License Number: 1801438239
NPI: 1598122871
Accepting New Patients: Yes
Min/Max Age: 0\120
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

FALLBROOK FALLBROOK FAMILY HLTH CTR
Provider ID: 183910
1328 S MISSION RD
FALLBROOK, CA 92028-4006
Phone: 760-451-4720
Fax: 760-451-4700
After Hours Phone: 760-451-4720
License Number: 1598122871
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: N/A
### PROVIDER
Medical Group/IPA: FALLBROOK FAMILY HLTH CTR
网站地图: N/A

### FALLBROOK FAMILY HLTH CTR

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<th>医疗集团/IPA</th>
<th>地址</th>
<th>电话</th>
<th>传真</th>
<th>After Hours Phone</th>
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<tr>
<td>FALLBROOK FAMILY HLTH CTR</td>
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<td>321 E ALVARADO ST, FALLBROOK, CA 92028-2912</td>
<td>760-723-6200</td>
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<td>NP95003447</td>
<td>1598122871</td>
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### VISTA COMMUNITY CLINIC

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<th>医疗集团/IPA</th>
<th>地址</th>
<th>电话</th>
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<th>After Hours Phone</th>
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<tr>
<td>VISTA COMMUNITY CLINIC</td>
<td>321 E ALVARADO ST, FALLBROOK, CA 92028</td>
<td>(760) 723-6200</td>
<td>(760) 723-6200</td>
<td>(760) 723-6200</td>
<td>080000002</td>
<td>1851300123</td>
<td>否</td>
<td><a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></td>
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### VISTA COMMUNITY CLINIC

<table>
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<tr>
<th>医疗集团/IPA</th>
<th>地址</th>
<th>电话</th>
<th>传真</th>
<th>After Hours Phone</th>
<th>许可证号</th>
<th>NPI</th>
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<th>网站</th>
</tr>
</thead>
<tbody>
<tr>
<td>VISTA COMMUNITY CLINIC</td>
<td>321 E ALVARADO ST, FALLBROOK, CA 92028</td>
<td>(760) 723-6200</td>
<td>(760) 723-6200</td>
<td>(760) 723-6200</td>
<td>080000002</td>
<td>1851300123</td>
<td>否</td>
<td><a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></td>
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</tbody>
</table>

D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

蓝色盾牌承诺 Medi-Cal 网络内提供者清单

D1. 具备联邦资质的健康诊所
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 550003781
NPI: 1851300123
Accepting New Patients: No
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 080000002
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 550004110
NPI: 1316501562
Accepting New Patients: No
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

**VISTA COMMUNITY CLINIC**
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 080000002
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\(^{\text{th}}\)–999
Site English Spoken: Y
Cultural Competency: Y
Hours: M 8:00AM–4:00PM
TU 8:00AM–6:00PM
W–TH 8:00AM–5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal–PHP
Website: www.vistacommunityclinic.org

**FALLBROOK FAMILY HLTH CTR**
Provider ID: 183910
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 451-4700
After Hours Phone: (760) 451-4720
License Number: 080000150
NPI: 1982756086
Accepting New Patients: Yes
Min/Max Age: 0\(^{\text{th}}\)–999
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER
Website: www.ihpsocal.org

**VISTA COMMUNITY CLINIC**
Provider ID: 624122
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
License Number: 550003781
NPI: 1649662719
Accepting New Patients: No
Min/Max Age: 0\(^{\text{th}}\)–999
Site English Spoken: Y
Cultural Competency: Y
Hours: M 8:00AM–4:00PM
TU 8:00AM–6:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal–PHP
Website: www.vistacommunityclinic.org

**IMPERIAL BEACH HEALTH CENTER**
Provider ID: 179678
949 PALM AVE
IMPERIAL BEACH, CA 91932–1503
Phone: 619–429–3733
After Hours Phone: 619–429–3733
License Number: A66830
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER
Website: www.ihpsocal.org

**IMPERIAL BEACH**
Provider ID: 179678
949 PALM AVE
IMPERIAL BEACH, CA 91932–1503
Phone: 619–429–3733
After Hours Phone: 619–429–3733
License Number: A51447
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER
Website: www.ihpsocal.org

如欲線上獲取精神健康服務提供者清單, 請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

**PROVIDER**
Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER
Website: www.ihpsocal.org

**IMPERIAL BEACH HEALTH CENTER**
Provider ID: 179678
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
License Number: 090000119
NPI: 1790718351
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: Y
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IMPERIAL BEACH HEALTH CENTER
Website: www.ihpsocal.org

**LA MESA PEDIATRICS**
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-6434
After Hours Phone: 619-464-6434
License Number: NP95017921
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A

**LA MESA PEDIATRICS**
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-5109
After Hours Phone: 619-464-6434
License Number: NP95017921
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A

**LA MESA PEDIATRICS**
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-5109
After Hours Phone: 619-464-6434
License Number: NP95017921
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A

**LA MESA PEDIATRICS**
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-6434
After Hours Phone: 619-464-6434
License Number: NP95017921
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A

**LA MESA PEDIATRICS**
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-6434
After Hours Phone: 619-464-6434
License Number: NP95017921
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

LA MESA PEDIATRICS
Provider ID: 480827
cción: CONTACT PROVIDER
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A

LA MESA PEDIATRICS
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-5109
After Hours Phone: 619-464-6434
License Number: A133241
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A

LA MESA PEDIATRICS
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-5109
After Hours Phone: 619-464-6434
License Number: C133872
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: No
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A

LA MESA PEDIATRICS
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-5109
After Hours Phone: 619-464-6434
License Number: A89865
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A

LA MESA PEDIATRICS
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-5109
After Hours Phone: 619-464-6434
License Number: 550000430
NPI: 1033759311
Accepting New Patients: Yes
Min/Max Age: 0\21
Site English Spoken: Y
Cultural Competency: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDATION
Website: N/A

LA MESA PEDIATRICS
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-5109
After Hours Phone: 619-464-6434
License Number: C133872
NPI: 1134144165
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MESA PEDIATRICS
Website: N/A

LA MESA PEDIATRICS
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: 619-464-6434
Fax: 619-464-5109
After Hours Phone: 619-464-6434
License Number: A152372
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE LAKESIDE
Website: www.ihpsocal.org

LA MESA PEDIATRICS
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
License Number: 550000430
NPI: 1033759311
Accepting New Patients: Yes
Min/Max Age: 0\21
Site English Spoken: Y
Cultural Competency: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE LAKESIDE
Website: www.ihpsocal.org

LA MESA PEDIATRICS
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
License Number: A43914
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE LAKESIDE
Website: www.ihpsocal.org

LA MESA PEDIATRICS
Provider ID: 480827
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942-3135
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
License Number: 550000430
NPI: 1033759311
Accepting New Patients: Yes
Min/Max Age: 0\21
Site English Spoken: Y
Cultural Competency: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE LAKESIDE
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

NEIGHBORHOOD HEALTHCARE LAKESIDE
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE
Provider ID: 353843
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: 858-218-3000
After Hours Phone: 858-218-3000
License Number: A75411
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE LAKESIDE
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE
Provider ID: 353843
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: 858-218-3000
Fax: 360-462-2744
After Hours Phone: 858-218-3000
License Number: DC33688
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
NEIGHBORHOOD HEALTHCARE LAKESIDE
Website: www.ihpsocal.org

NEIGHBORHOOD HEALTHCARE LAKESIDE
Provider ID: 353843
10039 VINE ST
LAKESIDE, CA 92040-3120
Phone: (858) 218-3000
Fax: (360) 462-2744
After Hours Phone: (858) 218-3000
License Number: 080000483
NPI: 1932384120
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

LEMON GROVE
LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: 20A107323
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: 619-515-2500
After Hours Phone: 619-515-2500
License Number: 20A108228
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

After Hours Phone: 619-515-2550
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

847
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: A154298
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: A165925
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA
91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: A178499
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

848
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

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<td>Website: N/A</td>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服务提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: NP95001050
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: NP95009933
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: PA12416
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: NP95013978
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

LEMON GROVE FAMILY HEALTH CENTER
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
Fax: 619-825-9577
After Hours Phone: 619-515-2550
NPI: 1134155377
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

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<td>7592 BROADWAY</td>
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<td>LEMON GROVE, CA 91945</td>
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<tr>
<td>Phone: (619) 515-2550</td>
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<tr>
<td>Fax: (619) 825-9577</td>
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<tr>
<td>After Hours Phone: (619) 515-2550</td>
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<td>License Number: PA56072</td>
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<td>NPI: 1134155377</td>
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**LEMON GROVE FAMILY HEALTH CENTER**
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: 619-515-2550
Fax: 619-825-9577
After Hours Phone: 619-515-2550
License Number: PA56072
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

**SAN YSIDRO HEALTH NATIONAL CITY**
Provider ID: 227412
1136 D AVE
NATIONAL CITY, CA 91950-3412
Phone: 619-662-4100
Fax: 619-474-3722
After Hours Phone: 619-662-4100
License Number: A55469
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

**LEMON GROVE FAMILY HEALTH CENTER**
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: PA56072
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

**LEMON GROVE FAMILY HEALTH CENTER**
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: RN428876
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

**LEMON GROVE FAMILY HEALTH CENTER**
Provider ID: 419139
7592 BROADWAY
LEMON GROVE, CA 91945-1604
Phone: 619-515-2550
After Hours Phone: 619-515-2550
License Number: RN428876
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LEMON GROVE FAMILY HEALTH CENTER
Website: N/A

After Hours Phone: 619-515-2550
License Number: 550001268
NPI: 1427282466
Accepting New Patients: Yes
Min/Max Age: 0-150
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: N/A
Email: valeriade@fhcsd.org

851
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY
Provider ID: 227412
1136 D AVE
NATIONAL CITY, CA 91950-3412
Phone: 619-662-4100
Fax: 619-474-3722
After Hours Phone: 619-662-4100
License Number: G46444
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPERATION SAMAHAN GRANGER SCHOOL BASED
Provider ID: 418302
2101 GRANGER AVE
NATIONAL CITY, CA 91950-6208
Phone: 844-200-2426
Fax: 619-434-8999
After Hours Phone: 844-200-2426
License Number: 550002622
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPERATION SAMAHAN GRANGER SCHOOL BASED
Provider ID: 417102
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950-7410
Phone: 844-200-2426
Fax: 844-200-2426
After Hours Phone: 844-200-2426
License Number: A74777
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

852
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - NATIONAL C
Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C
Provider ID: 417102
2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: NP95000203
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Tagalog, Lao, Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - NATIONAL C
Website: www.operationsamahan.org

OPERATION SAMAHAN - NATIONAL C
Provider ID: 417102
2743 HIGHLAND AVE NATIONAL CITY, CA 91950-7410
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: 90000183
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Tagalog, Lao, Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
OPERATION SAMAHAN - NATIONAL C
Website: www.operationsamahan.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185270
217 HIGHLAND AVE NATIONAL CITY, CA 91950-1518
Phone: 619-280-4213
After Hours Phone: 619-280-4213
License Number: A167184
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Tagalog, Lao, Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
LA MAESTRA FAMILY CLINIC INC
Website: www.operationsamahan.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

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

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA 91950-1518
Phone: 619-434-7308
Fax: 619-434-7310
After Hours Phone: 619-434-7308
License Number: NP95013257
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA 91950-1518
Phone: 619-434-7308
After Hours Phone: 619-434-7308
License Number: C55979
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA 91950-1518
Phone: 619-564-8765
After Hours Phone: 619-564-8765
License Number: G45632
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA 91950-1518
Phone: 619-434-7308
After Hours Phone: 619-434-7308
License Number: 20A6433
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
Website: www.lamaestra.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA 91950-1518
Phone: 619-434-7308
After Hours Phone: 619-434-7308
License Number: NP95009891
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
Website: www.lamaestra.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

INC
Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA 91950-1518
Phone: 619-434-7308
After Hours Phone: 619-434-7308
License Number: A123929
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
Website: www.lamaestra.org

SAN YSIDRO HEALTH SOUTH BAY
Provider ID: 361428
330 E 8TH ST
NATIONAL CITY, CA 91950-2312
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A133539
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY
Website: www.ihpsocal.org

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185270
217 HIGHLAND AVE
NATIONAL CITY, CA 91950-1518
Phone: 619-798-3977
After Hours Phone: 619-798-3977
License Number: A41375
NPI: 1609849074
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SOUTH BAY
Provider ID: 361428
330 E 8TH ST
NATIONAL CITY, CA 91950-2312
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: G71855
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SOUTH BAY
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

- **FAMILY HEALTH CTR SD NATIONAL CITY**
  - Provider ID: 418930
  - 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856
  - Phone: 619-515-2399
  - After Hours Phone: 619-515-2399
  - License Number: 20A18460
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER

- **FAMILY HEALTH CTR SD NATIONAL CITY**
  - Provider ID: 418930
  - 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856
  - Phone: 619-515-2399
  - After Hours Phone: 619-515-2399
  - License Number: A176878
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER

- **FAMILY HEALTH CTR SD NATIONAL CITY**
  - Provider ID: 418930
  - 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856
  - Phone: 619-515-2399
  - After Hours Phone: 619-515-2399
  - License Number: A163862
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER

- **FAMILY HEALTH CTR SD NATIONAL CITY**
  - Provider ID: 418930
  - 1000 EUCLID AVE NATIONAL CITY, CA 91950-3856
  - Phone: 619-515-2399
  - After Hours Phone: 619-515-2399
  - License Number: PA55660
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **1000 EUCLID AVE NATIONAL CITY, CA 91950-3856**
  - Phone: 619-515-2399
  - Fax: 619-269-0053
  - After Hours Phone: 619-515-2399
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HEALTH CTR SD NATIONAL CITY
  - Website: www.fhcsd.org

- **SAN YSIDRO HEALTH PARADISE HILLS**
  - Provider ID: 227418
  - 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: A118227
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
  - Website: www.ihpsocal.org

- **SAN YSIDRO HEALTH PARADISE HILLS**
  - Provider ID: 227418
  - 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: A146819
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
  - Website: www.ihpsocal.org

- **SAN YSIDRO HEALTH PARADISE HILLS**
  - Provider ID: 227418
  - 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: A138534
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): No
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
  - Website: www.ihpsocal.org

- **SAN YSIDRO HEALTH PARADISE HILLS**
  - Provider ID: 227418
  - 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
  - Phone: 619-662-4100
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

- **SAN YSIDRO HEALTH PARADISE HILLS**
  - Provider ID: 227418
  - 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: G88347
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Tagalog, Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
  - Website: www.ihpsocal.org

- **SAN YSIDRO HEALTH PARADISE HILLS**
  - Provider ID: 227418
  - 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: A167529
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Tagalog, Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
  - Website: www.ihpsocal.org

- **SAN YSIDRO HEALTH PARADISE HILLS**
  - Provider ID: 227418
  - 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
  - Phone: 619-662-4100
  - Fax: 619-259-2807
  - After Hours Phone: 619-662-4100
  - License Number: 20A11518
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Tagalog, Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
  - Website: www.ihpsocal.org

- **SAN YSIDRO HEALTH PARADISE HILLS**
  - Provider ID: 227418
  - 2400 E 8TH ST STE A NATIONAL CITY, CA 91950-2956
  - Phone: 619-662-4100
  - Fax: 619-259-2807
  - After Hours Phone: 619-662-4100
  - License Number: A157488
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Tagalog, Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
  - Website: www.ihpsocal.org

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您的 PCP 的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得 Blue Shield 的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访 blueshieldca.com/fad。
Fax: 619-259-2807
☎ After Hours Phone: 619-662-4100
License Number: A113624
NPI: 1598122871
Accepting New Patients: Yes
☑ Site English Spoken: Yes
☑ Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH PARADISE HILLS
Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY
Provider ID: 227412
☎ 1136 D AVE
NATIONAL CITY, CA 91950-3412
☎ Phone: 619-336-2300
☎ After Hours Phone: 619-336-2300
License Number: A78373
NPI: 1598122871
Accepting New Patients: Yes
☑ Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY
Provider ID: 227412
☎ 1136 D AVE
NATIONAL CITY, CA 91950-3412
☎ Phone: 619-428-4463
☎ After Hours Phone: 619-428-4463
License Number: G71855
NPI: 1598122871
Accepting New Patients: Yes
☑ Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY
Provider ID: 227412
☎ 1136 D AVE
NATIONAL CITY, CA 91950-3412
☎ Phone: 619-662-4100
☎ After Hours Phone: 619-662-4100
License Number: A103218
NPI: 1598122871
Accepting New Patients: Yes
☑ Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH NATIONAL CITY
Website: www.ihpsocal.org

SAN YSIDRO HEALTH NATIONAL CITY
Provider ID: 227412
☎ 1136 D AVE
NATIONAL CITY, CA 91950-3412
☎ Phone: 619-662-4100
☎ After Hours Phone: 619-662-4100
License Number: A138919
NPI: 1598122871
Accepting New Patients: Yes
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

- **Site English Spoken**: Yes
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Medical Group/IPA**: SAN YSIDRO HEALTH NATIONAL CITY
- **Website**: www.ihpsocal.org

**SAN YSIDRO HEALTH NATIONAL CITY**
Provider ID: 227412
- **1136 D AVE**
  NATIONAL CITY, CA 91950-3412
- **Phone**: 619-662-4100
- **After Hours Phone**: 619-662-4100
- **License Number**: C55180
- **NPI**: 1598122871
- **Accepting New Patients**: Yes
- **Site English Spoken**: Yes
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**SAN YSIDRO HEALTH NATIONAL CITY**
Provider ID: 227412
- **1136 D AVE**
  NATIONAL CITY, CA 91950-3412
- **Phone**: 619-662-4100
- **After Hours Phone**: 619-662-4100
- **License Number**: A165184
- **NPI**: 1598122871
- **Accepting New Patients**: Yes
- **Site English Spoken**: Yes
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**SAN YSIDRO HEALTH NATIONAL CITY**
Provider ID: 227412
- **2400 E 8TH ST STE A**
  NATIONAL CITY, CA 91950
- **Phone**: (619) 662-4100
- **After Hours Phone**: (619) 662-4100
- **License Number**: A112571
- **NPI**: 1598122871
- **Accepting New Patients**: Yes
- **Site English Spoken**: Yes
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**SAN YSIDRO HEALTH PARADISE HILLS**
Provider ID: 227418
- **2400 E 8TH ST STE A**
  NATIONAL CITY, CA 91950
- **Phone**: (619) 662-4100
- **Fax**: (619) 259-2807
- **After Hours Phone**: (619) 662-4100
- **License Number**: A112571
- **NPI**: 1598907487
- **Accepting New Patients**: Yes
- **Min/Max Age**: 0\150
- **Site English Spoken**: Y
- **Site Languages(s) Spoken**: Tagalog, Spanish
- **Cultural Competency**: Y
- **Hours**: M-F
  8:00AM-5:00PM

American Sign Language (ASL): N
- **Accessibility**: CONTACT PROVIDER
<table>
<thead>
<tr>
<th>PROVIDER</th>
<th>Medical Group/IPA: IHP of Southern Cal–PHP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Website: syhealth.org/clinics/paradise-hills-family-clinic</td>
<td></td>
</tr>
</tbody>
</table>

**FAMILY HEALTH CTR SD NATIONAL CITY**  
Provider ID: 418930  
1000 EUCLID AVE  
NATIONAL CITY, CA 91950  
Phone: (619) 515-2399  
Fax: (619) 269-0053  
After Hours Phone: (619) 515-2399  
License Number: 550000465  
NPI: 1417409228  
Accepting New Patients: Yes  
Min/Max Age: 0\150  
Site English Spoken: Y  
Cultural Competency: N  
Hours: M 8:30AM-3:30PM  
Tu 10:30AM-5:30PM  
W 8:30AM-3:30PM  
Th 10:30AM-5:30PM  
F 8:30AM-3:30PM  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: Family Health Centers of San Diego  
Website: www.fhcsd.org  
Email: lucinaj@fhcsd.org

**SAN YSIDRO HEALTH SOUTH BAY**  
Provider ID: 361428  
330 E 8TH ST  
NATIONAL CITY, CA 91950  
Phone: (619) 662-4100  
Fax: (619) 434-3514  
After Hours Phone: (619) 662-4100  
License Number: 1851757215  
NPI: 1801907449  
Accepting New Patients: Yes  
Min/Max Age: 0\150  
Site English Spoken: Y  
Site Languages(s) Spoken: Tagalog, Spanish  
Cultural Competency: Y  
Hours: M-TH 8:00AM-6:00PM  
F 8:00AM-5:00PM  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: Operation Samahan  
Website: www.operationsamahan.org

**LA MAESTRA FAMILY CLINIC INC**  
Provider ID: 185270  
217 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
Phone: (619) 434-7308  
Fax: (619) 434-7310  
After Hours Phone: (619) 434-7308  
NPI: 1417409228  
Accepting New Patients: Yes  
Min/Max Age: 0\150  
Site English Spoken: Y  
Site Languages(s) Spoken: Tagalog, Lao, Spanish  
Cultural Competency: Y  
Hours: M-Th 8:00AM-6:00PM  
F 8:00AM-5:00PM  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**OPERATION SAMAHAN - NATIONAL C**  
Provider ID: 417102  
2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
Phone: (844) 200-2426  
Fax: (619) 474-3919  
After Hours Phone: (844) 200-2426  
License Number: 090000183  
NPI: 1801907449  
Accepting New Patients: Yes  
Min/Max Age: 0\150  
Site English Spoken: Y  
Site Languages(s) Spoken: Tagalog, Lao, Spanish  
Cultural Competency: Y  
Hours: M-Th 8:00AM-6:00PM  
F 8:00AM-5:00PM  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: Operation Samahan  
Website: www.operationsamahan.org

**OPERATION SAMAHAN GRANGER SCHOOL BASED**  
Provider ID: 418302  
2101 GRANGER AVE  
NATIONAL CITY, CA 91950  
Phone: (844) 200-2426  
Fax: (619) 434-8999
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **After Hours Phone:** (844) 200-2426
  - License Number: 550002622
  - NPI: 1205134517
  - Accepting New Patients: Yes
  - Min/Max Age: 0\150
  - Site English Spoken: Y
  - Cultural Competency: N
  - Hours: M-F
    - 8:00AM-5:00PM
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: Operation Samahan
  - Website: www.operationsamahan.org

**SAN YSIDRO HEALTH NATIONAL CITY**

- **Provider ID:** 227412
  - 1136 D AVE
    - NATIONAL CITY, CA 91950
  - Phone: (619) 662-4100
  - Fax: (619) 474-3722
  - After Hours Phone: (619) 662-4100
  - NPI: 1003869363
  - Accepting New Patients: Yes
  - Min/Max Age: 0\150
  - Site English Spoken: Y
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: TRUECARE
  - Website: www.ihpsocal.org

**TRUECARE**

- **Provider ID:** 296476
  - 605 CROUCH ST BLDG C
    - OCEANSIDE, CA 92054-4415
  - Phone: 760-736-6767
  - After Hours Phone: 760-736-6767
  - License Number: 20A7241
    - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: TRUECARE
  - Website: www.ihpsocal.org

**TRUECARE**

- **Provider ID:** 296476
  - 605 CROUCH ST BLDG C
    - OCEANSIDE, CA 92054-4415
  - Phone: 760-736-6767
  - After Hours Phone: 760-736-6767
  - License Number: NP95012681
    - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: TRUECARE
  - Website: www.ihpsocal.org

**TRUECARE**

- **Provider ID:** 296476
  - 605 CROUCH ST BLDG C
    - OCEANSIDE, CA 92054-4415
  - Phone: 760-736-6767
  - After Hours Phone: 760-736-6767
  - License Number: NP95013879
    - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish

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After Hours Phone: (844) 200-2426

License Number: 550002622

NPI: 1205134517

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hours: M-F

8:00AM-5:00PM

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: Operation Samahan

Website: www.operationsamahan.org

San Ysidro Health National City

Provider ID: 227412

1136 D Ave

National City, CA 91950

Phone: (619) 662-4100

Fax: (619) 474-3722

After Hours Phone: (619) 662-4100

NPI: 1003869363

Accepting New Patients: Yes

Min/Max Age: 0\150

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 Crouch St Bldg C

Oceanside, CA 92054-4415

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 Crouch St Bldg C

Oceanside, CA 92054-4415

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: NP95012681

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

TRUECARE

Provider ID: 296476

605 Crouch St Bldg C

Oceanside, CA 92054-4415

Phone: 760-736-6767

After Hours Phone: 760-736-6767

License Number: NP95013879

NPI: 1598122871

Accepting New Patients: Yes

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE

Website: www.ihpsocal.org

---

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad 。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

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

- Cultural Competency: No
  - Cultural Competency: No
  - Cultural Competency: No
  - Cultural Competency: No

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

- Accessibility: CONTACT PROVIDER
  - Accessibility: CONTACT PROVIDER
  - Accessibility: CONTACT PROVIDER
  - Accessibility: CONTACT PROVIDER

Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 296476
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
Phone: 760-757-4566
After Hours Phone: 760-757-4566
License Number: 20A15689
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 296476
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
Phone: 760-757-4566
After Hours Phone: 760-757-4566
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 296476
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
Phone: 760-757-4566
After Hours Phone: 760-757-4566
License Number: PA53036
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

TRUECARE
Provider ID: 296476
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
 질문: 760-757-4566
Fax: 760-757-3004
向後電話: 760-757-4566
License Number: A66289
NPI: 1598122871
接受新患者: 是
話し言葉: 是
語言: 西班牙語
文化適應性: 否
手語: 不
聯繫: CONTACT PROVIDER
醫學小組/IPA: TRUECARE
Website: www.ihapsocal.org

TRUECARE
Provider ID: 296479
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054-4415
電話: 760-757-4566
向後電話: 760-757-4566
License Number: A64435
NPI: 1598122871
接受新患者: 是
話し言葉: 是
語言: 西班牙語
文化適應性: 否
手語: 不
聯繫: CONTACT PROVIDER
醫學小組/IPA: TRUECARE
Website: www.ihapsocal.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 2057-6043
電話: 760-631-5000
向後電話: 760-631-5000
License Number: 20A8949
NPI: 1598122871
接受新患者: 是
話し言葉: 是
文化適應性: 否
手語: 不
聯繫: CONTACT PROVIDER
醫學小組/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommu nityclinic.org

您的 PCP 的醫生小組可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 2057-6043
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: A149340
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 2057-6043
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: NP95009284
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 2057-6043
Phone: 760-631-5000
Fax: 760-414-3731
After Hours Phone: 760-631-5000
License Number: A130883
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 2057-6043
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: NP95016368
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

TRUECARE
Provider ID: 480315
3220 MISSION AVE STE 1
OCEANSIDE, CA 92058-1354
Phone: 760-433-3155
Fax: 760-736-8740
After Hours Phone: 760-433-3155
License Number: 80000240
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

865
## D. Blue Shield Promise Medi-Cal 網絡內提供者清單

### D1. 具備聯邦資質的健康診所

<table>
<thead>
<tr>
<th>Medical Group/IPA: TRUECARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Website: N/A</td>
</tr>
</tbody>
</table>

#### TRUECARE

**Provider ID:** 480315  
**3220 MISSION AVE STE 1 OCEANSIDE, CA 92058-1354**  
**Phone:** 760-433-3155  
**After Hours Phone:** 760-433-3155  
**License Number:** PA53036  
**NPI:** 1598122871  
**Accepting New Patients:** Yes  
**Site English Spoken:** Yes  
**Cultural Competency:** No  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Medical Group/IPA:** TRUECARE  
**Website:** N/A

<table>
<thead>
<tr>
<th>TRUECARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provider ID:** 480315</td>
</tr>
<tr>
<td><strong>3220 MISSION AVE STE 1 OCEANSIDE, CA 92058-1354</strong></td>
</tr>
</tbody>
</table>
| **Phone:** 760-891-4667  
**After Hours Phone:** 760-891-4667  
**License Number:** A131678  
**NPI:** 1598122871  
**Accepting New Patients:** Yes  
**Site English Spoken:** Yes  
**Cultural Competency:** No  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Medical Group/IPA:** TRUECARE  
**Website:** N/A

#### VISTA COMMUNITY CLINIC

**Provider ID:** 206341  
**4700 N RIVER RD OCEANSIDE, CA 2057-6043**  
**Phone:** 760-631-5000  
**After Hours Phone:** 760-631-5000  
**License Number:** 20A18374  
**NPI:** 1598122871  
**Accepting New Patients:** Yes  
**Site English Spoken:** Yes  
**Cultural Competency:** No  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Medical Group/IPA:** VISTA COMMUNITY CLINIC  
**Website:** www.vistacommunityclinic.org

**VISTA COMMUNITY CLINIC**

**PIER VIEW WAY**
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Provider ID: 402434
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: 760-631-5000
Fax: 760-414-3892
After Hours Phone: 760-631-5000
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC PIER VIEW WAY
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
PIER VIEW WAY
Provider ID: 402434
818 PIER VIEW WAY
OCEANSIDE, CA 92054-2803
Phone: 760-631-5000
Fax: 760-414-3892
After Hours Phone: 760-631-5000
License Number: 80000510
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC PIER VIEW WAY
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
HORNE STREET
Provider ID: 402436
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: 760-631-5000
Fax: 760-414-3892
After Hours Phone: 760-631-5000
License Number: 80000745
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
Website: www.vistacommunityclinic.org

Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
Website: N/A

VISTA COMMUNITY CLINIC
HORNE STREET
Provider ID: 402436
517 N HORNE ST
OCEANSIDE, CA 92054-2518
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: NP95006826
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
Website: N/A
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

License Number: NP95007885
NPI: 1598122871
Accepting New Patients: Yes
❑ Site English Spoken: Yes
❑ Cultural Competency: No
❑ American Sign Language (ASL): N
❑ Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC HORNE STREET
❑ Website: N/A

VISTA COMMUNITY CLINIC HORNE STREET
Provider ID: 402436
❑ 517 N HORNE ST
OCEANSIDE, CA 92054–2518
❑ Phone: (760) 631-5000
Fax: (760) 414-3892
❑ After Hours Phone: (760) 631-5000
License Number: 080000510
NPI: 1629357355
Accepting New Patients: Yes
Min/Max Age: 0\999
❑ Site English Spoken: Y
Cultural Competency: Y
❑ Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL): N
❑ Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
❑ Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org

TRUECARE
Provider ID: 480247
❑ 2210 MESA DR STE 300
OCEANSIDE, CA 92054
❑ Phone: (760) 757-5841
Fax: (760) 736-8740
❑ After Hours Phone: (760) 757-5841
License Number: 080000637
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
❑ Site English Spoken: Y
Cultural Competency: N
❑ Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM
American Sign Language (ASL): N
❑ Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
❑ Website: N/A

TRUECARE
Provider ID: 480247
❑ 2210 MESA DR STE 300
OCEANSIDE, CA 92054
❑ Phone: (760) 631-5000
Fax: (760) 414-3892
❑ After Hours Phone: (760) 631-5000
License Number: 080000510
NPI: 1629357355
Accepting New Patients: Yes
Min/Max Age: 0\999
❑ Site English Spoken: Y
Cultural Competency: Y
❑ Hours: M-TU
8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL): N
❑ Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
❑ Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

OCEANSIDE, CA 92054
📍 Phone: (760) 757-5841
Fax: (760) 736-8740
📍 After Hours Phone: (760) 757-5841
License Number: 080000531
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
📍 Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org

VISTA COMMUNITY CLINIC
HORNE STREET
Provider ID: 402436
📍 517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
📍 After Hours Phone: (760) 631-5000
License Number: 080000745
NPI: 1609094036
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
📍 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057
📍 Phone: (760) 631-5000
Fax: (760) 414-3892
📍 After Hours Phone: (760) 631-5000
License Number: 550004110
NPI: 1649662719
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
📍 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
4700 N RIVER RD
OCEANSIDE, CA 92057
📍 Phone: (760) 631-5000
Fax: (760) 414-3892
📍 After Hours Phone: (760) 631-5000
License Number: 550003781
NPI: 1649662719
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
📍 Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org

Email: credentialing@vcc.org

您的
PCP
的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。

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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

**Southern Cal-PHP**
Website: www.vistacommunityclinic.org

**VISTA COMMUNITY CLINIC**  
Provider ID: 206341  
4700 N RIVER RD  
OCEANSIDE, CA 92057  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
License Number: 550004110  
NPI: 1316501562  
Accepting New Patients: Yes  
Min/Max Age: 0\999

Site English Spoken: Y  
Cultural Competency: Y  
Hours: M-F  
8:00AM-5:00PM  
SA 9:00AM-4:00PM  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP of Southern Cal-PHP  
Website: www.vistacommunityclinic.org

**VISTA COMMUNITY CLINIC**  
Provider ID: 206341  
4700 N RIVER RD  
OCEANSIDE, CA 92057  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
License Number: 550003781  
NPI: 1316501562  
Accepting New Patients: Yes  
Min/Max Age: 0\999

Site English Spoken: Y  
Cultural Competency: Y  
Hours: M-F  
8:00AM-5:00PM  
SA 9:00AM-4:00PM  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP of Southern Cal-PHP  
Website: www.vistacommunityclinic.org

**VISTA COMMUNITY CLINIC**  
Provider ID: 206341  
4700 N RIVER RD  
OCEANSIDE, CA 92057  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
License Number: 080000002  
NPI: 1316501562  
Accepting New Patients: Yes  
Min/Max Age: 0\999

Site English Spoken: Y  
Cultural Competency: Y  
Hours: M-F  
8:00AM-5:00PM  
SA 9:00AM-4:00PM  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP of Southern Cal-PHP  
Website: www.vistacommunityclinic.org

**VISTA COMMUNITY CLINIC**  
Provider ID: 206341  
4700 N RIVER RD  
OCEANSIDE, CA 92057  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
License Number: 550003781  
NPI: 1316501562  
Accepting New Patients: Yes  
Min/Max Age: 0\999

Site English Spoken: Y  
Cultural Competency: Y  
Hours: M-F  
8:00AM-5:00PM  
SA 9:00AM-4:00PM  
American Sign Language (ASL):
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

VISTA COMMUNITY CLINIC
Provider ID: 206341
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 080000002
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: Y
Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org

PAUMA VALLEY
NEIGHBORHOOD
HEALTHCARE PAUMA VALLEY
Provider ID: 206267
16650 HIGHWAY 76
PAUMA VALLEY, CA 92061-9524
Phone: 760-742-9919
After Hours Phone: 760-742-9919
License Number: A114419
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE PAUMA VALLEY
Provider ID: 206267
16650 HIGHWAY 76
PAUMA VALLEY, CA 92061-9524
Phone: 760-742-9919
After Hours Phone: 760-742-9919
License Number: G61829
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Medical Group/IPA:
NEIGHBORHOOD
HEALTHCARE PAUMA VALLEY
Website: www.ihpsocal.org

NEIGHBORHOOD
HEALTHCARE PAUMA VALLEY
Provider ID: 206267
16650 HIGHWAY 76
PAUMA VALLEY, CA 92061-9524
Phone: 760-742-9919
Fax: 858-633-4696
After Hours Phone: 760-742-9919
License Number: 80000611
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

POWAY

NEIGHBORHOOD
HEALTHCARE GOLD FAMILY HEALTH CENTER
Provider ID: 481187
13010 POWAY RD
POWAY, CA 92064-4520
Phone: 858-218-3000
Fax: 360-462-2742
After Hours Phone: 858-218-3000
License Number: 550004321
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
Website: N/A

NEIGHBORHOOD
HEALTHCARE PAUMA VALLEY
Provider ID: 206267
16650 HIGHWAY 76
PAUMA VALLEY, CA 92061
Phone: (760) 742-9919
Fax: (858) 633-4696
After Hours Phone: (760) 742-9919
License Number: 080000611
NPI: 1407031693
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-4:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
Website: N/A

NEIGHBORHOOD
HEALTHCARE GOLD FAMILY HEALTH CENTER
Provider ID: 481187
13010 POWAY RD
POWAY, CA 92064-4520
Phone: 858-218-3000
After Hours Phone: 858-218-3000
License Number: A119661
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD
HEALTHCARE GOLD FAMILY
Website: N/A

YOUR PCP's Doctor Group may have network mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require prior authorization by the Blue Shield mental health provider, then the service will be covered.

To online get a list of mental health service providers, please visit blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

NEIGHBORHOOD
HEALTHCARE GOLD FAMILY HEALTH CENTER
Provider ID: 481187
13010 POWAY RD
POWAY, CA 92064-4520
Phone: 858-218-3000
After Hours Phone: 858-218-3000
License Number: A120771
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER
Website: N/A

NEIGHBORHOOD
HEALTHCARE GOLD FAMILY HEALTH CENTER
Provider ID: 481187
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742
After Hours Phone: (858) 218-3000
License Number: 550004321
NPI: 1023518768
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

SAN DIEGO
SAN DIEGO FAMILY CARE
Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: 858-810-8700
After Hours Phone: 858-810-8700
License Number: NP16433
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL):
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN DIEGO FAMILY CARE
Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: 858-810-8700
After Hours Phone: 858-810-8700
License Number: NP23847
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO FAMILY CARE
Website: www.sdfamilycare.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: 20A12504
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: 20A12504
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: 20A12504
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: 20A12504
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: 20A15459
NPI: 1134155377

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: 20A17702
NPI: 1134155377

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: 20A17926
NPI: 1134155377

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: 20A19399
NPI: 1134155377

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: A100333
NPI: 1134155377

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: A109633
NPI: 1134155377

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: A119631
NPI: 1134155377

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: A140324
NPI: 1134155377

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: 619-515-2444
Fax: 858-488-1394
After Hours Phone: 619-515-2444
License Number: 80000115
NPI: 1134155377

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Website: www.fhcsd.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: 858-279-0925
After Hours Phone: 858-279-0925
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

License Number: A119010
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342
Phone: 858-279-0925
After Hours Phone: 858-279-0925
License Number: C174985
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342
Phone: 858-279-0925
After Hours Phone: 858-279-0925
License Number: G41532
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
6973 LINDA VISTA RD SAN DIEGO, CA 92111-6342
Phone: 858-279-0925
After Hours Phone: 858-279-0925
License Number: G44807
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
Website: www.sdfamilycare.org
LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: 858-279-0925
Fax: 858-279-0377
After Hours Phone: 858-279-0925
License Number: G70886
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: 858-279-0925
Fax: 858-279-0377
After Hours Phone: 858-279-0925
License Number: A93812
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111-6342
Phone: 858-279-0925
Fax: 858-633-4680
After Hours Phone: 858-279-0925
License Number: 20A12402
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LINDA VISTA HEALTH CARE CTR
Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE
Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: 858-810-8700
After Hours Phone: 858-810-8700
License Number: 20A12402
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **NPI**: 1598122871
- **Accepting New Patients**: Yes
- **Site English Spoken**: Yes
- **Site Languages(s) Spoken**: Lithuanian, Vietnamese, Spanish, Chinese
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Medical Group/IPA**: SAN DIEGO FAMILY CARE
- **Website**: www.sdfamilycare.org

## SAN DIEGO FAMILY CARE

**Provider ID**: 482070

- **7011 LINDA VISTA RD**
- **SAN DIEGO, CA 92111-6307**
- **Phone**: 858-810-8700
- **After Hours Phone**: 858-810-8700
- **License Number**: A119010
- **NPI**: 1598122871
- **Accepting New Patients**: Yes
- **Site English Spoken**: Yes
- **Site Languages(s) Spoken**: Lithuanian, Vietnamese, Spanish, Chinese
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**Website**: www.sdfamilycare.org

## SAN DIEGO FAMILY CARE

**Provider ID**: 482070

- **7011 LINDA VISTA RD**
- **SAN DIEGO, CA 92111-6307**
- **Phone**: 858-810-8700
- **After Hours Phone**: 858-810-8700
- **License Number**: A61238
- **NPI**: 1598122871
- **Accepting New Patients**: Yes
- **Site English Spoken**: Yes
- **Site Languages(s) Spoken**: Lithuanian, Vietnamese, Spanish, Chinese
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**Website**: www.sdfamilycare.org

## SAN DIEGO FAMILY CARE

**Provider ID**: 482070

- **7011 LINDA VISTA RD**
- **SAN DIEGO, CA 92111-6307**
- **Phone**: 858-810-8700
- **After Hours Phone**: 858-810-8700
- **License Number**: A92173
- **NPI**: 1598122871
- **Accepting New Patients**: Yes
- **Site English Spoken**: Yes
- **Site Languages(s) Spoken**: Lithuanian, Vietnamese, Spanish, Chinese
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**Website**: www.sdfamilycare.org

## SAN DIEGO FAMILY CARE

**Provider ID**: 482070

- **7011 LINDA VISTA RD**
- **SAN DIEGO, CA 92111-6307**
- **Phone**: 858-810-8700
- **After Hours Phone**: 858-810-8700
- **License Number**: A72833
- **NPI**: 1598122871
- **Accepting New Patients**: Yes
- **Site English Spoken**: Yes
- **Site Languages(s) Spoken**: Lithuanian, Vietnamese, Spanish, Chinese
- **Cultural Competency**: No
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**Website**: www.sdfamilycare.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO FAMILY CARE
Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE
Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: 858-810-8700
After Hours Phone: 858-810-8700
License Number: A94449
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO FAMILY CARE
Website: www.sdfamilycare.org

SAN DIEGO FAMILY CARE
Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111-6307
Phone: 858-810-8700
After Hours Phone: 858-810-8700
License Number: G41532
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Site Languages(s) Spoken: Lithuanian, Vietnamese, Spanish, Chinese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO FAMILY CARE
Website: www.sdfamilycare.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
3705 MISSION BLVD
SAN DIEGO, CA 92109-7104
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A162946
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網路內提供者清單
D1. 具備聯邦資質的健康診所

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<th>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></th>
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<td>Provider ID: 402851</td>
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<td>3705 MISSION BLVD SAN DIEGO, CA 92109-7104</td>
<td>Phone: 619-515-2444</td>
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<tr>
<td>After Hours Phone: 619-515-2444</td>
<td>License Number: 20A11535</td>
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<td>NPI: 1134155377</td>
<td>Accepting New Patients: Yes</td>
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<td>Site English Spoken: Yes</td>
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<td>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</td>
<td>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
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<td>FAMILY HLTH CTR SAN DIEGO-BEACH AREA</td>
<td>Provider ID: 402851</td>
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<tr>
<td>3705 MISSION BLVD SAN DIEGO, CA 92109-7104</td>
<td>Phone: 619-515-2444</td>
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<tr>
<td>After Hours Phone: 619-515-2444</td>
<td>License Number: 20A14919</td>
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<td>NPI: 1134155377</td>
<td>Accepting New Patients: Yes</td>
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<td>Site English Spoken: Yes</td>
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<tr>
<td>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</td>
<td>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
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<thead>
<tr>
<th>PROVIDER INFORMATION</th>
<th>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></th>
</tr>
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<tbody>
<tr>
<td>FAMILY HLTH CTR SAN DIEGO-BEACH AREA</td>
<td>Provider ID: 402851</td>
</tr>
<tr>
<td>3705 MISSION BLVD SAN DIEGO, CA 92109-7104</td>
<td>Phone: 619-515-2444</td>
</tr>
<tr>
<td>After Hours Phone: 619-515-2444</td>
<td>License Number: 20A14919</td>
</tr>
<tr>
<td>NPI: 1134155377</td>
<td>Accepting New Patients: Yes</td>
</tr>
<tr>
<td>Site English Spoken: Yes</td>
<td>Cultural Competency: No</td>
</tr>
<tr>
<td>American Sign Language (ASL): N</td>
<td>Accessibility: CONTACT PROVIDER</td>
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<tr>
<td>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</td>
<td>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
</tr>
</tbody>
</table>

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<tr>
<td>FAMILY HLTH CTR SAN DIEGO-BEACH AREA</td>
<td>Provider ID: 402851</td>
</tr>
<tr>
<td>3705 MISSION BLVD SAN DIEGO, CA 92109-7104</td>
<td>Phone: 619-515-2444</td>
</tr>
<tr>
<td>After Hours Phone: 619-515-2444</td>
<td>License Number: 20A14919</td>
</tr>
<tr>
<td>NPI: 1134155377</td>
<td>Accepting New Patients: Yes</td>
</tr>
<tr>
<td>Site English Spoken: Yes</td>
<td>Cultural Competency: No</td>
</tr>
<tr>
<td>American Sign Language (ASL): N</td>
<td>Accessibility: CONTACT PROVIDER</td>
</tr>
<tr>
<td>Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA</td>
<td>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
</tr>
</tbody>
</table>
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

.dequeue

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
- Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
- 3705 MISSION BLVD SAN DIEGO, CA 92109-7104
- Phone: 619-515-2444
- After Hours Phone: 619-515-2444
- License Number: A116680
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
- Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
- 3705 MISSION BLVD SAN DIEGO, CA 92109-7104
- Phone: 619-515-2444
- After Hours Phone: 619-515-2444
- License Number: A148014
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
- Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
- 3705 MISSION BLVD SAN DIEGO, CA 92109-7104
- Phone: 619-515-2444
- After Hours Phone: 619-515-2444
- License Number: A154399
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
- Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
- 3705 MISSION BLVD SAN DIEGO, CA 92109-7104
- Phone: 619-515-2444
- After Hours Phone: 619-515-2444
- License Number: A154298
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
- Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
- 3705 MISSION BLVD SAN DIEGO, CA 92109-7104
- Phone: 619-515-2444
- After Hours Phone: 619-515-2444
- License Number: A163464
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
- Website: www.fhcsd.org

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Website: www.fhcsd.org

882
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1134155377
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Cultural Competency: No
American Sign Language (ASL): N
 ☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA
_website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
_telephone: 3705 MISSION BLVD SAN DIEGO, CA 92109-7104
_Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
_Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
_Website: www.fhcsd.org

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Provider ID: 402851
_Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
_Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
_Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA
Provider ID: 402851
_Website: www.fhcsd.org

Your PCP's physician group may have network-based mental health service providers. Please refer to the following list. You can directly contact these providers. Please note, some services may require mental health service providers to obtain prior authorization from Blue Shield, then the service will be covered.

To get online the mental health service provider list, please visit blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

**DIEGO-BEACH AREA**

Provider ID: 402851

- 3705 MISSION BLVD
  - SAN DIEGO, CA 92109-7104
- Phone: 619-515-2444
- After Hours Phone: 619-515-2444
- License Number: C174771
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

**FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

- 3705 MISSION BLVD
  - SAN DIEGO, CA 92109-7104
- Phone: 619-515-2444
- After Hours Phone: 619-515-2444
- License Number: DC20729
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

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Your PCP’s doctor group may have its own network mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require mental health service providers to obtain Blue Shield’s prior authorization, then the service will be covered.

To online access the Mental Health Service Providers List, please visit blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
- 3705 MISSION BLVD
- SAN DIEGO, CA 92109-7104
- Phone: 619-515-2444
- After Hours Phone: 619-515-2444
- License Number: NP95013978
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308
- 9855 ERMA RD STE 105
- SAN DIEGO, CA 92131-1007
- Phone: 844-200-2426
- Fax: 858-536-8034
- After Hours Phone: 844-200-2426
- License Number: 80000146
- NPI: 1801907449
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA

Website: www.operationsamahan.org

FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851
- 3705 MISSION BLVD
- SAN DIEGO, CA 92109-7104
- Phone: 619-515-2444
- After Hours Phone: 619-515-2444
- License Number: NP95013978
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Website: www.fhcsd.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308
- 9855 ERMA RD STE 105
- SAN DIEGO, CA 92131-1007
- Phone: 844-200-2426
- Fax: 858-536-8034
- After Hours Phone: 844-200-2426
- License Number: 80000146
- NPI: 1801907449
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
- 10737 CAMINO RUIZ STE 235
- SAN DIEGO, CA 92126-2375
- Phone: 844-200-2426
- After Hours Phone: 844-200-2426
- License Number: C54941
- NPI: 1801907449
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish, Tagalog
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA

Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: DC15775
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: yes
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA
Provider ID: 417101
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426
Fax: 858-578-4417
After Hours Phone: 844-200-2426
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: yes
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA
Provider ID: 432308
9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: A71544
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA
Provider ID: 417101
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426
Fax: 858-578-4417
After Hours Phone:
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

MESA
Provider ID: 432308
9855 ERMA RD STE 105
SAN DIEGO, CA 92131-1007
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: NP22974
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN - MIRA MESA
Website: www.operationsamahan.org

NESTOR COMMUNITY HEALTH CENTER
Provider ID: 214492
1016 OUTER RD
SAN DIEGO, CA 92154-1351
Phone: 619-429-3733
After Hours Phone: 619-429-3733
License Number: NP22031
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER
Website: www.ibclinic.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: DC15775
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN RANCHO PENASQUITOS
Website: www.operationsamahan.org

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: 844-200-2426
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

OPERATION SAMANAH
RANCHO PENASQUITOS
Provider ID: 418535
-town: 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: NP2907449
NPI: 1801907449
Accepting New Patients: Yes
- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMANAH RANCHO PENASQUITOS
Website: www.operationsamahan.org

NESTOR COMMUNITY HEALTH CENTER
Provider ID: 214492
-town: 1016 OUTER RD
SAN DIEGO, CA 92154-1351
Phone: 619-429-3733
Fax: 619-628-5550
After Hours Phone: 619-429-3733
License Number: 550001474
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMANAH RANCHO PENASQUITOS
Website: www.ibclinic.org

OPERATION SAMANAH
RANCHO PENASQUITOS
Provider ID: 418535
-town: 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: NP95003211
NPI: 1801907449
Accepting New Patients: Yes
- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMANAH RANCHO PENASQUITOS
Website: www.ibclinic.org

OPERATION SAMANAH
RANCHO PENASQUITOS
Provider ID: 418535
-town: 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: NP2907449
NPI: 1801907449
Accepting New Patients: Yes
- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMANAH RANCHO PENASQUITOS
Website: www.ibclinic.org

OPERATION SAMANAH
RANCHO PENASQUITOS
Provider ID: 418535
-town: 9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129-2889
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: NP95003211
NPI: 1801907449
Accepting New Patients: Yes
- Site English Spoken: yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMANAH RANCHO PENASQUITOS
Website: www.ibclinic.org

### Cultural Competency: No
### American Sign Language (ASL): N
### Accessibility: CONTACT PROVIDER
### Medical Group/IPA: OPERATION SAMANAH RANCHO PENASQUITOS
### Website: www.ibclinic.org

888
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN DIEGO, CA 92129-2889
Phone: 844-200-2426
Fax: 858-695-9074
After Hours Phone: 844-200-2426
NPI: 1801907449
Accepting New Patients: Yes
Site English Spoken: yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: OPERATION SAMAHAN
RANCHO PENASQUITOS
Website: www.operationsamahan.org

OPERATION SAMAHAN - MIRA MESA
Provider ID: 417101
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126-2375
Phone: 844-200-2426
After Hours Phone: 844-200-2426
License Number: A112781
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER
Website: www.ibclinic.org
D. Blue Shield Promise Medi-Cal

D1. 具備聯邦資質的健康診所

Provider ID: 214492

1016 OUTER RD
SAN DIEGO, CA 92154-1351
Phone: 619-429-3733
After Hours Phone: 619-429-3733
License Number: A165398
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NESTOR COMMUNITY HEALTH CENTER
Website: www.ibclinic.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: 619-515-2426
After Hours Phone: 619-515-2426
License Number: PA58098
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR IBARRA
Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 419167

140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: 619-515-2520
Fax: 619-231-0431
After Hours Phone: 619-515-2520
License Number: 550002061
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR IBARRA
Website: www.fhcsd.org

FAMILY HEALTH CTR OF SDELM ST

Provider ID: 417987

4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: 619-515-2426
After Hours Phone: 619-515-2426
License Number: PA58905
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST
Website: www.fhcsd.org

FAMILY HEALTH CTR OF SDELM ST

Provider ID: 419167

140 ELM ST
SAN DIEGO, CA 92101-2602
Phone: 619-515-2520
Fax: 619-231-0431
After Hours Phone: 619-515-2520
License Number: 550002061
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR OF SDELM ST
Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA

Provider ID: 417987
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **FAMILY HEALTH CTR IBARRA**
  - Provider ID: 417987
  - 4874 POLK AVE
    - SAN DIEGO, CA 92105-2026
  - Phone: 619-515-2426
  - After Hours Phone: 619-515-2426
  - License Number: A173486
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HEALTH CTR IBARRA
  - Website: www.fhcsd.org

- **FAMILY HEALTH CTR IBARRA**
  - Provider ID: 417987
  - 4874 POLK AVE
    - SAN DIEGO, CA 92105-2026
  - Phone: 619-515-2426
  - After Hours Phone: 619-515-2426
  - License Number: G149974
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HEALTH CTR IBARRA
  - Website: www.fhcsd.org

- **FAMILY HEALTH CTR IBARRA**
  - Provider ID: 417987
  - 4874 POLK AVE
    - SAN DIEGO, CA 92105-2026
  - Phone: 619-515-2426
  - After Hours Phone: 619-515-2426
  - License Number: NP17838
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HEALTH CTR IBARRA
  - Website: www.fhcsd.org

- **FAMILY HEALTH CTR IBARRA**
  - Provider ID: 417987
  - 4874 POLK AVE
    - SAN DIEGO, CA 92105-2026
  - Phone: 619-515-2426
  - After Hours Phone: 619-515-2426
  - License Number: NP95004443
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: FAMILY HEALTH CTR IBARRA
  - Website: www.fhcsd.org

- **FAMILY HEALTH CTR IBARRA**
  - Provider ID: 417987
  - 4874 POLK AVE
    - SAN DIEGO, CA 92105-2026
  - Phone: 619-515-2426
  - After Hours Phone: 619-515-2426
  - License Number: PA21385

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891
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<td>185268</td>
<td>4060 FAIRMOUNT AVE</td>
<td>619-255-9154</td>
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<td>Family Health CTR IBARRA</td>
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<td>LA MAESTRA FAMILY CLINIC INC</td>
<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
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Your PCP's provider group may have networked mental health service providers. Please refer to the list below. You can directly contact these providers. Please note that certain services may require mental health service providers to obtain prior authorization from Blue Shield, and the service will be covered if authorized.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<table>
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<tr>
<th>Provider ID</th>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>License Number</th>
<th>NPI</th>
<th>Accepting New Patients</th>
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<th>Site English Spoken</th>
<th>Cultural Competency</th>
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<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
뇌 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608
뇌 Phone: 619-255-9155
뇌 After Hours Phone: 619-255-9155
License Number: PA21625
NPI: 1609849074
Accepting New Patients: Yes
뇌 Site English Spoken: Yes
뇌 Cultural Competency: No
뇌 American Sign Language (ASL): N
뇌 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
뇌 Website: www.lamaestra.org
LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
뇌 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608
뇌 Phone: 619-255-9155
뇌 After Hours Phone: 619-255-9155
License Number: A81682
NPI: 1609849074
Accepting New Patients: Yes
뇌 Site English Spoken: Yes
뇌 Cultural Competency: No
뇌 American Sign Language (ASL): N
뇌 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
뇌 Website: www.lamaestra.org
LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
뇌 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608
뇌 Phone: 619-255-9155
뇌 After Hours Phone: 619-255-9155
License Number: 20A14222
NPI: 1609849074
Accepting New Patients: Yes
뇌 Site English Spoken: Yes
뇌 Cultural Competency: No
뇌 American Sign Language (ASL): N
뇌 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
뇌 Website: www.lamaestra.org
LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
뇌 4060 FAIRMOUNT AVE SAN DIEGO, CA 92105-1608
뇌 Phone: 619-798-3947
뇌 After Hours Phone: 619-798-3947
License Number: DC32800
NPI: 1609849074
Accepting New Patients: Yes
뇌 Site English Spoken: Yes
뇌 Cultural Competency: No
뇌 American Sign Language (ASL): N
뇌 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
뇌 Website: www.lamaestra.org

894
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Cultural Competency: No
American Sign Language (ASL): No
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LA MAESTRA FAMILY CLINIC INC
Website: www.lamaestra.org

SAN DIEGO AMERICAN INDIAN HEALTH CENTER
Provider ID: 207382
2630 1ST AVE
SAN DIEGO, CA 92103-6599
Phone: 619-234-2158
Fax: 619-234-0206
After Hours Phone: 619-234-2158
License Number: 90000168
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Korean, Spanish, Hindi
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER
Website: www.sdaihc.org

FAMILY HEALTH CTR IBARRA
Provider ID: 417987
4874 POLK AVE
SAN DIEGO, CA 92105-2026
Phone: 619-515-2426
After Hours Phone: 619-515-2426
License Number: 20A17577
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN DIEGO AMERICAN INDIAN HEALTH CENTER
Website: www.sdaihc.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A51318
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

895
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A68463
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A95577
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: NP95013978
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: PA21042
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
Fax: 619-683-7586
After Hours Phone: 619-515-2424
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: 20A15413
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A140646
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A147758
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

Website: www.blueshieldca.com/fad
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A173486
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A68463
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: NP95002226
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
- Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
Fax: 619-501-0627
After Hours Phone: 619-515-2424
License Number: NP95006792
NPI: 1134155377
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
- Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
Fax: 619-501-0627
After Hours Phone: 619-515-2424
License Number: PA18746
NPI: 1134155377
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
- Website: www.fhcsd.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233597
4290 POLK AVE
SAN DIEGO, CA 92105-1524
Phone: 619-563-0250
Fax: 619-501-0627
After Hours Phone: 619-563-0250
License Number: 20A7662
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: MID-CITY COMMUNITY CLINIC
- Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233597
4290 POLK AVE
SAN DIEGO, CA 92105-1524
Phone: 619-563-0250
Fax: 619-501-0627
After Hours Phone: 619-563-0250
License Number: 20A7662
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: MID-CITY COMMUNITY CLINIC
- Website: www.sdfamilycare.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **After Hours Phone:** 619-563-0250
  - License Number: A112176
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: MID-CITY COMMUNITY CLINIC
  - Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233597
- 4290 POLK AVE
  - SAN DIEGO, CA 92105-1524
  - Phone: 619-563-0250
  - After Hours Phone: 619-563-0250
  - License Number: A163512
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: MID-CITY COMMUNITY CLINIC
  - Website: www.sdfamilycare.org

- **After Hours Phone:** 619-563-0250
  - License Number: A175116
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: MID-CITY COMMUNITY CLINIC
  - Website: www.sdfamilycare.org

- **After Hours Phone:** 619-563-0250
  - License Number: DPM4434
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: MID-CITY COMMUNITY CLINIC
  - Website: www.sdfamilycare.org

- **After Hours Phone:** 619-563-0250
  - License Number: G60630
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: MID-CITY COMMUNITY CLINIC
  - Website: www.sdfamilycare.org

- **After Hours Phone:** 619-563-0250
  - License Number: A112176
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: MID-CITY COMMUNITY CLINIC
  - Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532
- 4305 UNIVERSITY AVE STE 150
  - SAN DIEGO, CA 92105-1690
  - Phone: 619-280-2058
  - After Hours Phone: 619-280-2058
  - License Number: A112176
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: MID-CITY COMMUNITY CLINIC
  - Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC

Provider ID: 233532
- 4305 UNIVERSITY AVE STE 150

您的 PCP 的醫生團體可能有自己的網路內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN DIEGO, CA 92105-1690
- Phone: 619-280-2058
- After Hours Phone: 619-280-2058
License Number: A152267
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233532
- 4305 UNIVERSITY AVE STE 150
  SAN DIEGO, CA 92105-1690
- Phone: 619-280-2058
- After Hours Phone: 619-280-2058
License Number: A61238
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233532
- 4305 UNIVERSITY AVE STE 150
  SAN DIEGO, CA 92105-1690
- Phone: 619-280-2058
- After Hours Phone: 619-280-2058
License Number: A94449
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233532
- 4305 UNIVERSITY AVE STE 150
  SAN DIEGO, CA 92105-1690
- Phone: 619-280-2058
- After Hours Phone: 619-280-2058
License Number: NP95019446
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Medical Group/IPA: MID-CITY COMMUNITY CLINIC
Website: www.sdfamilycare.org
FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: A169207
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: A171135
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: A177462
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: A70175
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org
D1. 具備聯邦資質的健康診所

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<th>Provider ID</th>
<th>Address</th>
<th>Phone</th>
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<th>License Number</th>
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<th>Site English Spoken</th>
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<td>4094 4TH AVE SAN DIEGO, CA 92103-2143</td>
<td>619-515-2545</td>
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<td>A80153</td>
<td>1134155377</td>
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<td>Yes</td>
<td>No</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
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Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: G16236
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: NP18098
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: NP7374
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: NP95001899
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: NP95005103
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

906
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Website: www.fhcsd.org

FAMILY HLTHCTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: NP95005293
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTHCTR SD HILLCREST
Website: www.fhcsd.org

Website: www.fhcsd.org

FAMILY HLTHCTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: PA23231
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTHCTR SD HILLCREST
Website: www.fhcsd.org

Website: www.fhcsd.org

FAMILY HLTHCTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: PT28061
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTHCTR SD HILLCREST
Website: www.fhcsd.org

Website: www.fhcsd.org

FAMILY HLTHCTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
After Hours Phone: 619-515-2545
License Number: PT25155
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTHCTR SD HILLCREST
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937  
4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
Phone: 619-515-2545  
After Hours Phone:  
619-515-2545  
License Number: PT292351  
NPI: 1134155377  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST  
Website: www.fhcsd.org

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937  
4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
Phone: 619-515-2545  
After Hours Phone:  
619-515-2545  
License Number: PT293536  
NPI: 1134155377  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST  
Website: www.fhcsd.org

Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937  
4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
Phone: 619-515-2545  
After Hours Phone:  
619-515-2545  
License Number: PT295173  
NPI: 1134155377  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST  
Website: www.fhcsd.org

Your PCP's physician group may have its own network of mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require the prior authorization of mental health service providers obtained by Blue Shield, then the service may be covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.

908
FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
Fax: 619-501-9645
After Hours Phone: 619-515-2545
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

FAMILY HLTH CTR SD HILLCREST
Provider ID: 417937
4094 4TH AVE
SAN DIEGO, CA 92103-2143
Phone: 619-515-2545
Fax: 619-501-9645
After Hours Phone: 619-515-2545
License Number: A95356
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SD HILLCREST
Website: www.fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
Provider ID: 517998
4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A7502
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
Website: N/A

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
Provider ID: 517998
4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 550003882
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
Website: N/A
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

**SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED**

Provider ID: 517998
4690 EL CAJON BLVD
SAN DIEGO, CA 92115-4403
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: NP95005999
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
Website: N/A

**NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

**NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

**NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A103099
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

**NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

**NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

D1. 具備聯邦資質的健康診所

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

911
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

CENTERs
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104-4120
Phone: 619-515-2424
After Hours Phone: 619-515-2424
License Number: A164859
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: NORTH PARK FAMILY HEALTH CENTERS
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
Provider ID: 417429
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: 619-515-2525
After Hours Phone: 619-515-2525
License Number: A128091
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
Website: www.fhcsd.org

FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
Provider ID: 417429
1550 BROADWAY STE 2
SAN DIEGO, CA 92101-5713
Phone: 619-515-2525
After Hours Phone: 619-515-2525
License Number: A163977
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
Website: www.fhcsd.org

912
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

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<th>Cultural Competency: No</th>
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<td>1550 BROADWAY STE 2 SAN DIEGO, CA 92101-5713</td>
<td>Phone: 619-515-2525</td>
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

CONNECTIONS
Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: 619-515-2525
Fax: 619-501-5814
After Hours Phone: 619-515-2525
License Number: 550002865
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR SAN DIEGOCITY COLLEGE
Website: www.fhcsd.org

CONNECTIONS
Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: 619-515-2430
After Hours Phone: 619-515-2430
License Number: PA58826
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DOWNTOWN FAMILY CTR AT CONNECTIONS
Website: www.fhcsd.org

CONNECTIONS
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: G72486
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS
Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: 619-515-2430
After Hours Phone: 619-515-2430
License Number: 20A7147
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DOWNTOWN FAMILY CTR AT CONNECTIONS
Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS
Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: 619-515-2430
Fax: 619-578-2410
After Hours Phone: 619-515-2430
License Number: PA58826
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DOWNTOWN FAMILY CTR AT CONNECTIONS
Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS
Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: 619-515-2430
Fax: 619-578-2410
After Hours Phone: 619-515-2430
License Number: 550002251
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DOWNTOWN FAMILY CTR AT CONNECTIONS
Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS
Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101-4368
Phone: 619-515-2430
Fax: 619-578-2410
After Hours Phone: 619-515-2430
License Number: 550002251
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DOWNTOWN FAMILY CTR AT CONNECTIONS
Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT CONNECTIONS
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: G72486
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: www.fhcsd.org

Your PCP's doctor group may have its own network-based mental health service providers. Please refer to the following list. You can contact these providers directly. Please note, certain services may require mental health service providers to obtain prior authorization from Blue Shield, and then the service will be covered.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: NP10769
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: A115598
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: A136275
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: A54702
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: A42127
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

Your PCP's doctor group may have their own network providers for mental health services. Please refer to the list below. You can contact these providers directly. Please note, some services may require the mental health provider to obtain Blue Shield prior authorization before the service can be covered.

To access the mental health provider list online, please visit blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網路內提供者清單

D1. 具備聯邦資質的健康診所

- Site English Spoken: yes
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
- Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: A60801
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

- Site English Spoken: yes
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
  Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: A67762
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

- Site English Spoken: yes
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
  Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: A82123
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

- Site English Spoken: yes
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
  Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: C53121
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

- Site English Spoken: yes
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
  Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: G29879
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

- Site English Spoken: yes
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
  Website: N/A

ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583
1501 IMPERIAL AVE SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: C53121
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
Website: N/A

- Site English Spoken: yes
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER
  Website: N/A

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FAMILY HEALTH CENTER
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: G71080
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
Website: N/A

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: G71080
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
Website: N/A

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101-7638
Phone: 619-233-8500
After Hours Phone: 619-233-8500
License Number: A109828
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: ST
VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
Website: N/A

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Provider ID: 419529
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
Phone: 619-515-2422
After Hours Phone: 619-515-2422
License Number: A122238
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO COMMERCIAL
Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Provider ID: 419529
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
Phone: 619-515-2422
After Hours Phone: 619-515-2422
License Number: A122238
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY
HLTH CTR OF SD SAN DIEGO COMMERCIAL
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Provider ID: 419529
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
Phone: 619-515-2422
After Hours Phone: 619-515-2422
License Number: PA20888
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Provider ID: 419529
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
Phone: 619-515-2422
After Hours Phone: 619-515-2422
Fax: 619-269-0053
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Provider ID: 419529
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113-1195
Phone: 619-515-2422
After Hours Phone: 619-515-2422
Fax: 619-269-0053
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: No
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Website: www.fhcsd.org

FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL
Provider ID: 517403
316 25TH ST
SAN DIEGO, CA 92102-3016
Phone: 619-662-4100
Fax: 619-238-3807
After Hours Phone: 619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE
Website: N/A

SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE
Provider ID: 517403
316 25TH ST
SAN DIEGO, CA 92102-3016
Phone: 619-662-4100
Fax: 619-238-3807
After Hours Phone: 619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE
Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Provider ID: 356145
2391 ISLAND AVE
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

SAN DIEGO, CA 92102-2941
Provider ID: 356145
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: 619-515-2435
After Hours Phone: 619-515-2435
License Number: A80504
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Provider ID: 356145
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: 619-515-2435
After Hours Phone: 619-515-2435
License Number: NP95011254
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Provider ID: 356145
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: 619-515-2435
After Hours Phone: 619-515-2435
License Number: PA16245
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Provider ID: 356145
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: 619-515-2435
After Hours Phone: 619-515-2435
License Number: PA53788
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Website: N/A

SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Provider ID: 356145
2391 ISLAND AVE
SAN DIEGO, CA 92102-2941
Phone: 619-515-2435
After Hours Phone: 619-515-2435
Fax: 619-515-2435
After Hours Phone: 619-515-2435
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SHERMAN HEIGHTS FAMILY HLTH CTRS INC
Website: N/A

Your PCP’s doctor group may have their own network of mental health service providers. Please refer to the following list. You may contact these providers directly. Please note, certain services may require prior authorization from Blue Shield before being covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE
Provider ID: 517403
316 25TH ST
SAN DIEGO, CA 92102-3016
Phone: 619-238-5551
After Hours Phone: 619-238-5551
License Number: A97270
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE
Website: N/A

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE
Provider ID: 517403
316 25TH ST
SAN DIEGO, CA 92102-3016
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: NP20849
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE
Website: N/A

KING CHAVEZ HEALTH CENTER
Provider ID: 451167
950 S EUCLID AVE
SAN DIEGO, CA 92114-6201
Phone: 619-662-4100
Fax: 619-662-4158
After Hours Phone: 619-662-4100
License Number: A96919
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: KING CHAVEZ HEALTH CENTER
Website: www.ihpsocal.org

920
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

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<td>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

<table>
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<th>KING CHAVEZ HEALTH CENTER</th>
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<td><strong>Phone:</strong> 619-662-4100</td>
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</tbody>
</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **Accessibility**: CONTACT PROVIDER
  **Medical Group/IPA**: KING CHAVEZ HEALTH CENTER
  **Website**: www.ihpsocal.org

- **LOGAN HEIGHTS FAMILY HEALTH CENTER**
  **Provider ID**: 206360
  **1809 NATIONAL AVE
  SAN DIEGO, CA 92113-2113**
  **Phone**: 619-515-2300
  **After Hours Phone**: 619-515-2300
  **License Number**: NP11778
  **NPI**: 1134155377
  **Accepting New Patients**: Yes
  **Site English Spoken**: Yes
  **American Sign Language (ASL)**: No
  **Cultural Competency**: No
  **American Sign Language (ASL)**: No

- **Accessibility**: CONTACT PROVIDER
  **Medical Group/IPA**: LOGAN HEIGHTS FAMILY HEALTH CENTER
  **Website**: www.fhcsd.org

- **LOGAN HEIGHTS FAMILY HEALTH CENTER**
  **Provider ID**: 206360
  **1809 NATIONAL AVE
  SAN DIEGO, CA 92113-2113**
  **Phone**: 619-515-2300
  **After Hours Phone**: 619-515-2300
  **License Number**: NP2286
  **NPI**: 1134155377
  **Accepting New Patients**: Yes
  **Site English Spoken**: Yes
  **Cultural Competency**: No
  **American Sign Language (ASL)**: No

- **Accessibility**: CONTACT PROVIDER
  **Medical Group/IPA**: LOGAN HEIGHTS FAMILY HEALTH CENTER
  **Website**: www.fhcsd.org

- **LOGAN HEIGHTS FAMILY HEALTH CENTER**
  **Provider ID**: 206360
  **1809 NATIONAL AVE
  SAN DIEGO, CA 92113-2113**
  **Phone**: 619-515-2300
  **After Hours Phone**: 619-515-2300
  **License Number**: NP95000602
  **NPI**: 1134155377
  **Accepting New Patients**: Yes
  **Site English Spoken**: Yes
  **Cultural Competency**: No
  **American Sign Language (ASL)**: No

- **Accessibility**: CONTACT PROVIDER
  **Medical Group/IPA**: LOGAN HEIGHTS FAMILY HEALTH CENTER
  **Website**: www.fhcsd.org

- **LOGAN HEIGHTS FAMILY HEALTH CENTER**
  **Provider ID**: 206360
  **1809 NATIONAL AVE
  SAN DIEGO, CA 92113-2113**
  **Phone**: 619-515-2300
  **After Hours Phone**: 619-515-2300
  **License Number**: NP95001705
  **NPI**: 1134155377
  **Accepting New Patients**: Yes
  **Site English Spoken**: Yes
  **American Sign Language (ASL)**: No

- **Accessibility**: CONTACT PROVIDER
  **Medical Group/IPA**: LOGAN HEIGHTS FAMILY HEALTH CENTER
  **Website**: www.fhcsd.org

923
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: NP95007253
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: NP95011254
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: NP95015780
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: NP95011313
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org
LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: PA15227
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: PA17864
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: PA20396
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

HEIGHTS FAMILY HEALTH CENTER
- Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
- 1809 NATIONAL AVE
- SAN DIEGO, CA 92113-2113
- Phone: 619-515-2300
- After Hours Phone: 619-515-2300
- License Number: PA21591
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
- Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
- 1809 NATIONAL AVE
- SAN DIEGO, CA 92113-2113
- Phone: 619-515-2300
- After Hours Phone: 619-515-2300
- License Number: PA53788
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
- Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
- 1809 NATIONAL AVE
- SAN DIEGO, CA 92113-2113
- Phone: 619-515-2300
- After Hours Phone: 619-515-2300
- License Number: PA54661
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
- Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
- 1809 NATIONAL AVE
- SAN DIEGO, CA 92113-2113
- Phone: 619-515-2300
- After Hours Phone: 619-515-2300
- License Number: PT295463
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
- Website: www.fhcsd.org

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): No
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
- Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: PT30272
NPI: 1134155377
Accepting New Patients: Yes

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: RN486421
NPI: 1134155377
Accepting New Patients: Yes

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: SP27677
NPI: 1134155377
Accepting New Patients: Yes

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: RN810863
NPI: 1134155377
Accepting New Patients: Yes
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

FAMILY HEALTH CTR SAN DIEGO-OAK PARK
Provider ID: 418142
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
Fax: 619-515-2510
After Hours Phone: 619-515-2300
License Number: A178494
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK
Provider ID: 418142
5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
Phone: 619-515-2454
After Hours Phone: 619-515-2454
License Number: 20A12796
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK
Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK
Provider ID: 418142
5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
Phone: 619-515-2454
After Hours Phone: 619-515-2454
License Number: C174538
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: FAMILY HEALTH CTR SAN DIEGO-OAK PARK
Website: www.fhcsd.org

Website: www.blueshieldca.com/fad
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

HEALTH CTR SAN DIEGO-OAK PARK
Website: www.fhcsd.org

FAMILY HEALTH CTR SAN DIEGO-OAK PARK
Provider ID: 418142
5160 FEDERAL BLVD
SAN DIEGO, CA 92105-5429
Phone: 619-515-2454
Fax: 619-794-2696
After Hours Phone: 619-515-2454
License Number: 550003556
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW
Provider ID: 227409
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A120447
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW
Provider ID: 227409
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A153414
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW
Website: www.ihpsocal.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW
Provider ID: 227409
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113-1432
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A157505
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW
Website: www.ihpsocal.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal

您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。

如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 227409
- 3177 OCEAN VIEW BLVD
  SAN DIEGO, CA 92113-1432
- Phone: 619-662-4100
- Fax: 619-595-0258
- After Hours Phone: 619-662-4100
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW
- Website: www.ihpsocal.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
- 4725 MARKET ST
  SAN DIEGO, CA 92102-4715
- Phone: 619-263-2499
- After Hours Phone: 619-263-2499
- License Number: 20A7241
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
- Website: www.fhcsd.org

SAN YSIDRO HEALTH CHC - OCEAN VIEW
Provider ID: 227409
- 3177 OCEAN VIEW BLVD
  SAN DIEGO, CA 92113-1432
- Phone: 619-662-4100
- Fax: 619-858-1003
- After Hours Phone: 619-662-4100
- License Number: A88893
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: SAN YSIDRO HEALTH CHC - OCEAN VIEW
- Website: www.ihpsocal.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
- 4725 MARKET ST
  SAN DIEGO, CA 92102-4715
- Phone: 619-515-2420
- After Hours Phone: 619-515-2420
- License Number: 20A11535
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
- Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
- 4725 MARKET ST
  SAN DIEGO, CA 92102-4715
- Phone: 619-515-2420
- After Hours Phone: 619-515-2420
- License Number: A154298
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
- Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2420
After Hours Phone: 619-515-2420
License Number: A68463
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: 20A14772
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A115598
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

933
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A119689
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A137260
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A140912
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A141057
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A142743
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NEIGHBORHOODS FAMILY HLTH CTRS INC
_website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A148014
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
_website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A163464
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
_website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A164879
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
_website: www.fhcsd.org

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
_website: www.fhcsd.org

935
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- Site English Spoken: Yes
  Cultural Competency: No
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
  Website: www.fhcsd.org
  Provider ID: 206363
  4725 MARKET ST
  SAN DIEGO, CA 92102-4715
  Phone: 619-515-2560
  After Hours Phone: 619-515-2560
  License Number: A72005
  NPI: 1134155377
  Accepting New Patients: Yes
- Site English Spoken: Yes
  Cultural Competency: No
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
  Website: www.fhcsd.org
  Provider ID: 206363
  4725 MARKET ST
  SAN DIEGO, CA 92102-4715
  Phone: 619-515-2560
  After Hours Phone: 619-515-2560
  License Number: G61394
  NPI: 1134155377
  Accepting New Patients: Yes

如欲線上獲取精神健康服務提供者清單, 請造訪 blueshieldca.com/fad。
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: 20A12653
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: 20A17072
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: 20A17478
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A108228
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

938
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

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</table>

您的 PCP 的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得 Blue Shield 的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A146111
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A146838
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A147939
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A151631
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A154298
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A163183
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A163978
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A164859
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A164889
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A169752
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A177373
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A178499
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A177462
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N

Accession Information:

 postingskip

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- **LOGAN HEIGHTS FAMILY HEALTH CENTER**
  - Provider ID: 206360
  - Provider ID: 206360
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113-2113
  - Phone: 619-515-2300
  - After Hours Phone: 619-515-2300
  - License Number: A181809
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
  - Website: www.fhcsd.org

- **LOGAN HEIGHTS FAMILY HEALTH CENTER**
  - Provider ID: 206360
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113-2113
  - Phone: 619-515-2300
  - After Hours Phone: 619-515-2300
  - License Number: A61687
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
  - Website: www.fhcsd.org

- **LOGAN HEIGHTS FAMILY HEALTH CENTER**
  - Provider ID: 206360
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113-2113
  - Phone: 619-515-2300
  - After Hours Phone: 619-515-2300
  - License Number: A68124
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
  - Website: www.fhcsd.org

- **LOGAN HEIGHTS FAMILY HEALTH CENTER**
  - Provider ID: 206360
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113-2113
  - Phone: 619-515-2300
  - After Hours Phone: 619-515-2300
  - License Number: A71671
  - NPI: 1134155377
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
  - Website: www.fhcsd.org
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D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: A97036
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www fhcsd org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: DPM4819
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www fhcsd org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www fhcsd org

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D. Blue Shield Promise Medi-Cal 网络内提供者清单

D1. 具备联邦资质的健康诊所

License Number: G81658
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: NM792
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: PA58081
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113-2113
Phone: 619-515-2300
After Hours Phone: 619-515-2300
License Number: NP10906
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: LOGAN HEIGHTS FAMILY HEALTH CENTER
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: PA58505
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: PA60864
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: RN810863
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: A100391
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: MT2061555
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102-4715
Phone: 619-515-2560
After Hours Phone: 619-515-2560
License Number: G78814
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Website: www.fhcsd.org

Website: www.blueshieldca.com/fad
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

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<th>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</th>
<th>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></th>
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<tr>
<td>Provider ID: 206363</td>
<td>4725 MARKET ST, SAN DIEGO, CA 92102-4715</td>
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<tr>
<td>Phone: 619-515-2560</td>
<td>After Hours Phone: 619-515-2560</td>
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<tr>
<td>License Number: NP17362</td>
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<td>Accepting New Patients: Yes</td>
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<th>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></th>
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<tr>
<td>Phone: 619-515-2560</td>
<td>After Hours Phone: 619-515-2560</td>
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<td>License Number: NP95000205</td>
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<td>Accepting New Patients: Yes</td>
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<th>Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC</th>
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</tr>
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<td>Provider ID: 206363</td>
<td>4725 MARKET ST, SAN DIEGO, CA 92102-4715</td>
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<tr>
<td>Phone: 619-515-2560</td>
<td>After Hours Phone: 619-515-2560</td>
</tr>
<tr>
<td>License Number: NP95001492</td>
<td>NPI: 1134155377</td>
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<tr>
<td>Accepting New Patients: Yes</td>
<td>Site English Spoken: Yes</td>
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<td>Cultural Competency: No</td>
<td>American Sign Language (ASL): N</td>
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<td>Accessibility: CONTACT PROVIDER</td>
<td>Accessibility: CONTACT PROVIDER</td>
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</tbody>
</table>

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

License Number: NP95007000  
NPI: 1134155377  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC  
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
Phone: 619-515-2560  
After Hours Phone: 619-515-2560  
License Number: NP95021154  
NPI: 1134155377  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC  
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
Phone: 619-515-2560  
After Hours Phone: 619-515-2560  
License Number: NP95009292  
NPI: 1134155377  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC  
Website: www.fhcsd.org

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
Phone: 619-515-2560  
After Hours Phone: 619-515-2560  
License Number: PA20378  
NPI: 1134155377  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC  
Website: www.fhcsd.org

OPERATION SAMAHAN

OPERATION SAMAHAN RANCHO PENASQUITOS
Provider ID: 418535  
9995 CARMEL MOUNTAIN RD STE B10 AND B11  
SAN DIEGO, CA 92129  
Phone: (844) 200-2426  
Fax: (858) 695-9074  
After Hours Phone: (844) 200-2426  
License Number: 550002478  
NPI: 1699216622  
Accepting New Patients: Yes  
Min/Max Age: 0\150  
Site English Spoken: Y  
Site Language(s) Spoken: Spanish  
Cultural Competency: N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: Operation Samahan  
Website: www.operationsamahan.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Min/Max Age: 0\150
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
- Cultural Competency: N
- Hours: M-TU 8:30AM-5:30PM
  W 10:00AM-7:00PM
  TH-F 8:30AM-5:30PM
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OPERATION SAMAHAN - MIRA
MESA
Provider ID: 417101
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
- Phone: (844) 200-2426
- Fax: (858) 578-4417
- After Hours Phone: (844) 200-2426
- License Number: 080000146
- NPI: 1871680397
- Accepting New Patients: Yes
- Min/Max Age: 0\150
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
- Cultural Competency: Y
- Hours: M-F 8:00AM-4:30PM
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OPERATION SAMAHAN - MIRA
MESA
Provider ID: 432308
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
- Phone: (844) 200-2426
- Fax: (858) 536-8034
- After Hours Phone: (844) 200-2426
- License Number: 080000146
- NPI: 1861933897
- Accepting New Patients: Yes
- Min/Max Age: 0\999
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish, Tagalog
- Cultural Competency: Y
- Hours: M-F 8:00AM-4:30PM
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OPERATION SAMAHAN - MIRA
MESA
Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
- Phone: (844) 200-2426
- Fax: (858) 695-9074
- After Hours Phone: (844) 200-2426
- License Number: 550003857
- NPI: 1699216622
- Accepting New Patients: Yes
- Min/Max Age: 0\150
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
- Cultural Competency: N
- Hours: M-TU 8:30AM-5:30PM
  W 10:00AM-7:00PM
  TH-F 8:30AM-5:30PM
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OPERATION SAMAHAN - MIRA
MESA
Provider ID: 418535
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
- Phone: (844) 200-2426
- Fax: (858) 695-9074
- After Hours Phone: (844) 200-2426
- License Number: 550003857
- NPI: 1699216622
- Accepting New Patients: Yes
- Min/Max Age: 0\150
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
- Cultural Competency: N
- Hours: M-TU 8:30AM-5:30PM
  W 10:00AM-7:00PM
  TH-F 8:30AM-5:30PM
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad 。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

PROVIDER
Medical Group/IPA: Operation Samahan
Website: www.operationsamahan.org

NESTOR COMMUNITY HEALTH CENTER
Provider ID: 214492
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
License Number: 550001474
NPI: 1215246996
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: Y
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.sdfamilycare.org
Email: avaldez@ibclinic.org

SAN DIEGO FAMILY CARE
Provider ID: 482070
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
NPI: 1457724858
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: Y
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.sdfamilycare.org

N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.sdfamilycare.org

LINDA VISTA HEALTH CARE CTR
Provider ID: 206046
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
NPI: 1609905215
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: Y
Hours: M-F 8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.sdfamilycare.org

951
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
NPI: 1780665877
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Vietnamese, Spanish, Chinese, Lithuanian
Cultural Competency: Y
Hours: M-F
8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.sdfamilycare.org
Email: fabianm@fhcsd.org

SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE
Provider ID: 517403
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 238-5551
Fax: (619) 238-3807
After Hours Phone: (619) 238-5551
NPI: 1598308926
Accepting New Patients: Yes
Min/Max Age: 0\120
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

FAMILY HLTH CTR SD SAN DIEGO COMMERCIAL
Provider ID: 419529
2325 COMMERCIAL ST STE
1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
Fax: (619) 269-0053
After Hours Phone: (619) 515-2422
License Number: 550003113
NPI: 1235521782
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 403583
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
License Number: 090000297
NPI: 1598122871
Accepting New Patients: No
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org
Email: janeta@fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 206360
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619) 515-2300
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: N/A

FAMILY HLTH CTR SAN DIEGO- CITY COLLEGE
Provider ID: 417429
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
Fax: (619) 501-5814
After Hours Phone: (619) 515-2525
License Number: 550002865
NPI: 1952729303
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.fhcsd.org
Email: janeta@fhcsd.org

SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED
Provider ID: 517998
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 824-9076
After Hours Phone: (619) 662-4100
License Number: 550003882
NPI: 1205477841
Accepting New Patients: Yes
Min/Max Age: 0\120
Site English Spoken: Y
Site Languages(s) Spoken: Chinese, Spanish, Tagalog, Vietnamese
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: N/A

LA MAESTRA FAMILY CLINIC INC
Provider ID: 185268
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
Fax: (619) 795-9849
After Hours Phone: (619) 280-4213
NPI: 1336353721
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: La Maestra Family Clinic
Website: www.lamaestra.org
Email:
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

aschmaltz@lamaestra.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 416831
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 683-7586
After Hours Phone: (619) 515-2424
License Number: 090000469
NPI: 1700821303
Accepting New Patients: Yes
Min/Max Age: 0 \ 18
Site English Spoken: Y
Cultural Competency: N
Hours: M-TH
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org

FAMILY HEALTH CTR IBARRA
Provider ID: 417987
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
Fax: (619) 255-8002
After Hours Phone: (619) 515-2426
License Number: 550003108
NPI: 1477953933
Accepting New Patients: Yes
Min/Max Age: 0 \ 150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:30AM-5:30PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org

NORTH PARK FAMILY HEALTH CENTERS
Provider ID: 206362
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 501-0627
After Hours Phone: (619) 515-2424
License Number: 550003108
NPI: 1477953933
Accepting New Patients: Yes
Min/Max Age: 0 \ 150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233532
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
NPI: 1962483040
Accepting New Patients: Yes
Min/Max Age: 0 \ 22
Site English Spoken: Y
Cultural Competency: Y
Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal–PHP
Website: www.sdfamilycare.org

MID-CITY COMMUNITY CLINIC
Provider ID: 233597
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
NPI: 1962483040
Accepting New Patients: Yes
Min/Max Age: 0 \ 150
Site English Spoken: Y
Cultural Competency: N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org

DOWNTOWN FAMILY CTR AT

Website: blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

CONNECTIONS
Provider ID: 417782
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
Fax: (619) 578-2410
After Hours Phone: (619) 515-2430
License Number: 550002251
NPI: 1588901045
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org
Email: jinah@fhcsd.org

SAN DIEGO AMERICAN INDIAN HEALTH CENTER
Provider ID: 207382
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
License Number: 090000168
NPI: 1003902917
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Korean, Spanish, Hindi
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.syhealth.org/clinics/king-chavez-health-center

DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC
Provider ID: 206363
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
Fax: (619) 263-2499
After Hours Phone: (619) 515-2560
NPI: 1982747671
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

- SAN YSIDRO HEALTH CHC - OCEAN VIEW
  Provider ID: 227409
  3177 OCEAN VIEW BLVD
  SAN DIEGO, CA 92113
  Phone: (619) 662-4100
  Fax: (619) 595-0258
  After Hours Phone: (619) 662-4100
  NPI: 1326225632
  Accepting New Patients: Yes
  Min/Max Age: 0\150
  Site English Spoken: Y
  Site Languages(s) Spoken: Spanish
  Cultural Competency: N
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: Family Health Centers of San Diego
  Website: www.fhcsd.org
  Email: nancyl@fhcsd.org

- FAMILY HEALTH CTR SAN DIEGO-OAK PARK
  Provider ID: 664747
  2114 NATIONAL AVE
  SAN DIEGO, CA 92113
  Phone: (619) 515-2406
  After Hours Phone: (619) 515-2406
  License Number: 550003556
  NPI: 1336525906
  Accepting New Patients: Yes
  Min/Max Age: 0\999
  Site English Spoken: Y
  Cultural Competency: N
  Hours: M-F
  8:30AM-5:30PM
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: Family Health Centers of San Diego
  Website: www.fhcsd.org
  Email: nancyl@fhcsd.org

- SAN MARCOS TRUECARE
  Provider ID: 625875
  1595 GRAND AVE STE 100
  SAN MARCOS, CA 92069-2973
  Phone: 760-736-6767
  After Hours Phone: 760-736-6767
  License Number: G74757
  NPI: 1598122871
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: Family Health Centers of San Diego
  Website: www.fhcsd.org
  Email: nancyl@fhcsd.org

LOGAN HEIGHTS FAMILY HEALTH CENTER
Provider ID: 624977
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
Fax: (619) 232-7011
After Hours Phone: (619) 515-2355
NPI: 1447281936
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: https://www.syhealth.org/locations

FAMILY HEALTH CTR SAN DIEGO-OAK PARK
Provider ID: 418142
5160 FEDERAL BLVD
SAN DIEGO, CA 92105
Phone: (619) 515-2454
Fax: (619) 794-2696
After Hours Phone: (619) 515-2454
License Number: 550003556
NPI: 1336525906
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hours: M-F
8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: Family Health Centers of San Diego
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: 20A15159
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: A48980
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: A116562
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: A71311
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

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

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: A63903
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: C54157
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: G71182
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: DC29074
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: NM235844
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
Acceping New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihapsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: NP95001653
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihapsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: NP95003903
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihapsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA17101
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihapsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA19825
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihapsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA19825
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihapsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: NP95002545
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihapsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: NP95003903
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihapsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Phone: 760-736-6767  
After Hours Phone: 760-736-6767  
License Number: NM235997  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Site Languages(s) Spoken: Spanish  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: TRUECARE  
Website: www.ihpsocal.org

TRUECARE  
Provider ID: 625875  
1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973  
Phone: 760-736-6767  
After Hours Phone: 760-736-6767  
License Number: NP18874  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Site Languages(s) Spoken: Spanish  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: TRUECARE  
Website: www.ihpsocal.org

TRUECARE  
Provider ID: 625875  
1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973  
Phone: 760-736-6767  
After Hours Phone: 760-736-6767  
License Number: NP20893  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Site Languages(s) Spoken: Spanish  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: TRUECARE  
Website: www.ihpsocal.org

TRUECARE  
Provider ID: 625875  
1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450  
Phone: 760-520-8200  
Fax: 360-462-2749  
After Hours Phone: 760-520-8200  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: TRUECARE  
Website: www.ihpsocal.org

TRUECARE  
Provider ID: 625875  
1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450  
Phone: 760-520-8200  
Fax: 360-462-2749  
After Hours Phone: 760-520-8200  
License Number: 80000167  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: TRUECARE  
Website: www.ihpsocal.org

TRUECARE  
Provider ID: 625875  
1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450  
Phone: 760-520-8200  
Fax: 360-462-2749  
After Hours Phone: 760-520-8200  
License Number: 80000167  
NPI: 1598122871  
Accepting New Patients: Yes  
Site English Spoken: Yes  
Cultural Competency: No  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Medical Group/IPA: TRUECARE  
Website: www.ihpsocal.org

TRUECARE  
Provider ID: 625875
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
Fax: 760-736-8740
After Hours Phone: 760-736-6767
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA22667
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92069-2973
Phone: 760-736-6767
After Hours Phone: 760-736-6767
License Number: PA21723
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

TRUECARE
Provider ID: 625875
1595 GRAND AVE STE 100
SAN MARCOS, CA 92078-2450
Phone: 760-736-6767
Fax: 760-736-6744
After Hours Phone: 760-736-6767
License Number: NP18788
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: TRUECARE
Website: www.ihpsocal.org

Website: www.blueshieldca.com/fad
**D. Blue Shield Promise Medi-Cal 網絡內提供者清單**

**D1. 具備聯邦資質的健康診所**

<table>
<thead>
<tr>
<th>Medical Group/IPA: TRUECARE</th>
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<tr>
<td>Provider ID: 625875</td>
<td>Provider ID: 614511</td>
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<tr>
<td>1595 GRAND AVE STE 100</td>
<td>1595 GRAND AVE STE 106</td>
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<tr>
<td>Phone: 760-736-6767</td>
<td>Phone: 760-736-6767</td>
<td>Phone: (760) 736-6767</td>
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<tr>
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<td>Fax: (760) 736-6740</td>
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<td>Medical Group/IPA: TRUECARE</td>
<td>Medical Group/IPA: TRUECARE</td>
<td>Medical Group/IPA: TRUECARE</td>
</tr>
<tr>
<td>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
<td>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
<td>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
</tr>
</tbody>
</table>

**TRUECARE**

Provider ID: 614511
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078-2450
Phone: 760-736-6767
Fax: 760-736-6744
After Hours Phone: 760-736-6767
License Number: C54157
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**TRUECARE**

Provider ID: 206426
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**TRUECARE**

Provider ID: 206426
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\150

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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

TRUECARE
Provider ID: 614511
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: 206426
150 VALPREDRA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: 206426
150 VALPREDRA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: 206426
150 VALPREDRA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: 206426
150 VALPREDRA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1245246917
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: 614511
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\1999
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: 614511
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: 614511
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\1999
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: 614511
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1598484255
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

TRUECARE
Provider ID: 614511
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
License Number: 080000167
NPI: 1811617939
Accepting New Patients: Yes
Min/Max Age: 0\1999
Site English Spoken: Y
Cultural Competency: N
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.ihpsocal.org

SAN YSIDRO
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A71304
D1. 具備聯邦資質的健康診所

NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A99433
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A93785
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A84160
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A72235
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

afür Phone: 619-662-4100
◎ After Hours Phone: 619-662-4100
License Number: A77936
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
◎ 4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
◎ Phone: 619-662-4100
◎ After Hours Phone: 619-662-4100
License Number: G80107
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
◎ 4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
◎ Phone: 619-662-4100
◎ After Hours Phone: 619-662-4100
License Number: G51462
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
◎ 4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
◎ Phone: 619-662-4100
◎ After Hours Phone: 619-662-4100
License Number: G81461
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

965
D1. 具備聯邦資質的健康診所

Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: G59670
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: DC33693
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
Fax: 619-205-6341
After Hours Phone: 619-662-4100
License Number: A55469
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: C42207
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
Fax: 619-205-6341
After Hours Phone: 619-662-4100
License Number: A78373
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
Fax: 619-205-6341
After Hours Phone: 619-662-4100
License Number: DPM2930
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
Fax: 619-205-6305
After Hours Phone: 619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
Fax: 619-205-6341
After Hours Phone: 619-662-4100
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

American Sign Language (ASL):
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
Fax: 619-205-6305
After Hours Phone: 619-662-4100
License Number: NP95003355
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
Fax: 619-205-6305
After Hours Phone: 619-662-4100
License Number: PA17162
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
Fax: 619-205-6305
After Hours Phone: 619-662-4100
License Number: PA20490
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
Fax: 619-205-6305
After Hours Phone: 619-662-4100
License Number: PA17162
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
Fax: 619-205-6305
After Hours Phone: 619-662-4100
License Number: PA20490
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
Fax: 619-205-6305
After Hours Phone: 619-662-4100
License Number: PA17162
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

<table>
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<th>Provider ID: 206292</th>
<th>4004 BEYER BLVD</th>
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<td>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</td>
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<td>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
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<td>NPI: 1598122871</td>
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<th>Provider ID: 206292</th>
<th>4004 BEYER BLVD</th>
<th>SAN YSIDRO, CA</th>
<th>92173-2007</th>
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<td>Phone: 619-428-4463</td>
<td>After Hours Phone: 619-428-4463</td>
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<tr>
<td>License Number: A112627</td>
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<td>NPI: 1598122871</td>
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<tr>
<td>Accepting New Patients: Yes</td>
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<tr>
<td>Site English Spoken: Yes</td>
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<td>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</td>
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<td>Cultural Competency: No</td>
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<td>American Sign Language (ASL): N</td>
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<td>Accessibility: CONTACT PROVIDER</td>
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<tr>
<td>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</td>
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<tr>
<td>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
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<th>Provider ID: 206292</th>
<th>4004 BEYER BLVD</th>
<th>SAN YSIDRO, CA</th>
<th>92173-2007</th>
</tr>
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<tr>
<td>Phone: 619-662-4100</td>
<td>After Hours Phone: 619-662-4100</td>
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<tr>
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<td>NPI: 1598122871</td>
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<td>Accepting New Patients: Yes</td>
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<td>Site English Spoken: Yes</td>
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<td>Site Languages(s) Spoken: Spanish, Tagalog, Portuguese</td>
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<td>Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</td>
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<tr>
<td>Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
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</tr>
</tbody>
</table>

969
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

- **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**
  - Provider ID: 206292
  - 4004 BEYER BLVD
  - SAN YSIDRO, CA 92173-2007
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: 20A12653
  - NPI: 15981122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
  - Website: www.ihpsocal.org

- **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTHCTR**
  - Provider ID: 227411
  - 4050 BEYER BLVD
  - SAN YSIDRO, CA 92173-2007
  - Phone: 619-662-4100
  - Fax: 619-205-1948
  - After Hours Phone: 619-662-4100
  - License Number: G51462
  - NPI: 15981122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
  - Website: www.ihpsocal.org

- **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTHCTR**
  - Provider ID: 227411
  - 4050 BEYER BLVD
  - SAN YSIDRO, CA 92173-2007
  - Phone: 619-662-4100
  - Fax: 619-205-1948
  - After Hours Phone: 619-662-4100
  - License Number: G20087
  - NPI: 15981122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
  - Website: www.ihpsocal.org

- **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**
  - Provider ID: 206292
  - 4004 BEYER BLVD
  - SAN YSIDRO, CA 92173-2007
  - Phone: 619-662-4100
  - After Hours Phone: 619-662-4100
  - License Number: A101017
  - NPI: 15981122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
  - Website: www.ihpsocal.org

970
D. Blue Shield Promise Medi-Cal 網路內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A8081
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A101827
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A17643
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A9907
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A17643
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
d1. 具備聯邦資質的健康診所

- After Hours Phone: 619-662-4100
  License Number: 20A7502
  NPI: 1598122871
  Accepting New Patients: Yes
  Site English Spoken: Yes
  Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
  Cultural Competency: No
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
  Website: www.ihpsocal.org

SAN YSIDRO HEALTH
MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A12555
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Website: www.ihpsocal.org

SAN YSIDRO HEALTH
MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A14949
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Website: www.ihpsocal.org

SAN YSIDRO HEALTH
MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: 20A8516
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Cultural Competency: No
☐ American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
смотрите: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
☐ 4050 BEYER BLVD
☐ SAN YSIDRO, CA 92173-2007
☐ Phone: 619-662-4100
☐ After Hours Phone: 619-662-4100
License Number: A178949
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Cultural Competency: No
☐ American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
смотрите: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
☐ 4050 BEYER BLVD
☐ SAN YSIDRO, CA 92173-2007
☐ Phone: 619-662-4100
☐ After Hours Phone: 619-662-4100
License Number: A113914
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Cultural Competency: No
☐ American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
смотрите: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
☐ 4050 BEYER BLVD
☐ SAN YSIDRO, CA 92173-2007
☐ Phone: 619-662-4100
☐ After Hours Phone: 619-662-4100
License Number: A112627
NPI: 1598122871
Accepting New Patients: Yes
☐ Site English Spoken: Yes
☐ Cultural Competency: No
☐ American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
смотрите: www.ihpsocal.org

Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
４０５０ＢＥＹＥＲＢＬＶＤ
ＳＡＮＹＳＩＤＲＯ，ＣＡ
９２１７３－２００７
📞 Phone: ６１９－６６２－４１００
⏰ After Hours Phone: ６１９－６６２－４１００
License Number: A138938
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
４０５０ＢＥＹＥＲＢＬＶＤ
ＳＡＮＹＳＩＤＲＯ，ＣＡ
９２１７３－２００７
📞 Phone: ６１９－６６２－４１００
⏰ After Hours Phone: ６１９－６６２－４１００
License Number: A157505
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
４０５０ＢＥＹＥＲＢＬＶＤ
ＳＡＮＹＳＩＤＲＯ，ＣＡ
９２１７３－２００７
📞 Phone: ６１９－６６２－４１００
⏰ After Hours Phone: ６１９－６６２－４１００
License Number: A49307
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
４０５０ＢＥＹＥＲＢＬＶＤ
ＳＡＮＹＳＩＤＲＯ，ＣＡ
９２１７３－２００７
📞 Phone: ６１９－６６２－４１００
⏰ After Hours Phone: ６１９－６６２－４１００
License Number: G52183
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Website: www.ihpsocal.org

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
４０５０ＢＥＹＥＲＢＬＶＤ
ＳＡＮＹＳＩＤＲＯ，ＣＡ
９２１７３－２００７
📞 Phone: ６１９－６６２－４１００
⏰ After Hours Phone: ６１９－６６２－４１００
License Number: A63844
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Website: www.ihpsocal.org

Your PCP’s network of providers may have its own network of mental health services providers. Please refer to the below list. You can contact these providers directly. Please note, some services may need a mental health services provider prior authorization before the service can be covered.

To access the mental health services provider list online, please visit blueshieldca.com/fad.
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

![Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR](image)

Website: www.ihpsocal.org

### SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

- **Address:** 4050 BEYER BLVD
  SAN YSIDRO, CA 92173-2007
- **Phone:** 619-662-4100
- **Fax:** 619-205-1948
- **After Hours Phone:** 619-662-4100
- **License Number:** A72721
- **NPI:** 1598122871

Accepting New Patients: Yes

- **Site English Spoken:** Yes
- **Cultural Competency:** No
- **American Sign Language (ASL):** N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Website: www.ihpsocal.org

### SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

- **Address:** 4050 BEYER BLVD
  SAN YSIDRO, CA 92173-2007
- **Phone:** 619-662-4100
- **After Hours Phone:** 619-662-4100
- **License Number:** C160626
- **NPI:** 1598122871

Accepting New Patients: Yes

- **Site English Spoken:** Yes
- **Cultural Competency:** No
- **American Sign Language (ASL):** N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Website: www.ihpsocal.org

### SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411

- **Address:** 4050 BEYER BLVD
  SAN YSIDRO, CA 92173-2007
- **Phone:** 619-662-4100
- **After Hours Phone:** 619-662-4100
- **License Number:** C149818
- **NPI:** 1598122871

Accepting New Patients: Yes

- **Site English Spoken:** Yes
- **Cultural Competency:** No
- **American Sign Language (ASL):** N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH
MATERNAL AND CHILD
HEALTH CTR
Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A47906
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A49307
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A63844
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
Provider ID: 206292
🌐 4004 BEYER BLVD
SAN YSIDRO, CA
92173–2007
📞 Phone: 619-662-4100
📞 After Hours Phone: 619-662-4100
License Number: A66885
NPI: 1598122871
Accepting New Patients: Yes
_site English Spoken: Yes
_site Languages(s) Spoken: Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL): N
เดี๋ยว Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
Provider ID: 206292
🌐 4004 BEYER BLVD
SAN YSIDRO, CA
92173–2007
📞 Phone: 619-662-4100
📞 After Hours Phone: 619-662-4100
License Number: A40480
NPI: 1598122871
Accepting New Patients: Yes
_site English Spoken: Yes
_site Languages(s) Spoken: Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL): N
莜 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
🌐 Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN
YSIDRO HEALTH CENTER
Provider ID: 206292
🌐 4004 BEYER BLVD
SAN YSIDRO, CA
92173–2007
📞 Phone: 619-662-4100
📞 After Hours Phone: 619-662-4100
License Number: A40061
NPI: 1598122871
Accepting New Patients: Yes
_site English Spoken: Yes
_site Languages(s) Spoken: Spanish, Tagalog,
Portuguese
Cultural Competency: No
American Sign Language (ASL): N
莜 Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO
HEALTH CENTER
🌐 Website: www.ihpsocal.org

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
### D. Blue Shield Promise Medi-Cal 網絡內提供者清單

#### D1. 具備聯邦資質的健康診所

| Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |
| Website: www.ihpsocal.org |
| **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER** |
| Provider ID: 206292 |
| 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 |
| Phone: 619-662-4100 |
| After Hours Phone: 619-662-4100 |
| License Number: A177337 |
| NPI: 1598122871 |
| Accepting New Patients: Yes |
| Site English Spoken: Yes |
| Site Languages(s) Spoken: Spanish, Tagalog, Portuguese |
| Cultural Competency: No |
| American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER |

| Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |
| Website: www.ihpsocal.org |
| **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER** |
| Provider ID: 206292 |
| 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 |
| Phone: 619-662-4100 |
| After Hours Phone: 619-662-4100 |
| License Number: A173435 |
| NPI: 1598122871 |
| Accepting New Patients: Yes |
| Site English Spoken: Yes |
| Site Languages(s) Spoken: Spanish, Tagalog, Portuguese |
| Cultural Competency: No |
| American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER |

| Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER |
| Website: www.ihpsocal.org |
| **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER** |
| Provider ID: 206292 |
| 4004 BEYER BLVD SAN YSIDRO, CA 92173-2007 |
| Phone: 619-662-4100 |
| After Hours Phone: 619-662-4100 |
| License Number: A158364 |
| NPI: 1598122871 |
| Accepting New Patients: Yes |
| Site English Spoken: Yes |
| Site Languages(s) Spoken: Spanish, Tagalog, Portuguese |
| Cultural Competency: No |
| American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER |

*Your PCP's doctor group may have its own network of mental health providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from a Blue Shield mental health provider before they can be covered.*

To view the mental health provider list online, please visit [blueshieldca.com/fad](http://blueshieldca.com/fad).
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

American Sign Language (ASL): N
无障碍性: CONTACT PROVIDER
医疗机构/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
网站: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
提供者ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173–2007
电话: 619–662–4100

- 花费电话: 619–662–4100
- 执照号: A159673
- NPI: 1598122871
- 接受新患者: 是
- 机构英语: 是
- 语言: 西班牙语、塔加洛语、葡萄牙语
- 文化能力: 否
- ASL: 否
- 网站: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
提供者ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173–2007
电话: 619–662–4100

- 花费电话: 619–662–4100
- 执照号: A169694
- NPI: 1598122871
- 接受新患者: 是
- 机构英语: 是
- 语言: 西班牙语、塔加洛语、葡萄牙语
- 文化能力: 否
- ASL: 否
- 网站: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
提供者ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173–2007
电话: 619–662–4100

- 花费电话: 619–662–4100
- 执照号: A145008
- NPI: 1598122871
- 接受新患者: 是
- 机构英语: 是
- 语言: 西班牙语、塔加洛语、葡萄牙语
- 文化能力: 否
- ASL: 否
- 网站: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
  Cultural Competency: No
  American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
  Medical Group/IPA: SAN
  YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
  Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A131952
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A132982
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A127188
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A145480
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN
YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A131952
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N

如欲線上獲取精神健康服務提供者清單, 請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

License Number: A130348
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A113482
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A114893
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A114008
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA
After Hours Phone: 619-662-4100
License Number: A114008
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A125329
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Website: www.ihpsocal.org

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173-2007
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A106103
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog, Portuguese
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
Fax: 619-600-4870
After Hours Phone: 619-662-4100
License Number: PT302385
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: G66745
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: NP12112
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: NP95001960
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: NP95004315
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: NP95003671
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

**PACE SENIOR HLTH SVS**
Provider ID: 227469
- 3364 BEYER BLVD
- SAN YSIDRO, CA 92173-1322
- Phone: 619-662-4100
- After Hours Phone: 619-662-4100
- License Number: PA58672
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO
- PACE SENIOR HLTH SVS
- Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO**

**PACE SENIOR HLTH SVS**
Provider ID: 227469
- 3364 BEYER BLVD
- SAN YSIDRO, CA 92173-1322
- Phone: 619-662-4100
- After Hours Phone: 619-662-4100
- License Number: NP95019995
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO
- PACE SENIOR HLTH SVS
- Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO**

**PACE SENIOR HLTH SVS**
Provider ID: 227469
- 3364 BEYER BLVD
- SAN YSIDRO, CA 92173-1322
- Phone: 619-662-4100
- After Hours Phone: 619-662-4100
- License Number: PA22855
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO
- PACE SENIOR HLTH SVS
- Website: www.ihpsocal.org

**SAN YSIDRO HLTH SAN DIEGO**

**PACE SENIOR HLTH SVS**
Provider ID: 227469
- 3364 BEYER BLVD
- SAN YSIDRO, CA 92173-1322
- Phone: 619-662-4100
- After Hours Phone: 619-662-4100
- License Number: A145480
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO
- PACE SENIOR HLTH SVS
- Website: www.ihpsocal.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
Phone: 619-600-4870
After Hours Phone: 619-600-4870
License Number: NP95018617 NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: C42207 NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: C42207 NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A51843 NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A51843 NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A51843 NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A51843 NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A51843 NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

985
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A167529
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A153975
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: 619-662-4100
After Hours Phone: 619-662-4100
License Number: A164201
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Website: www.ihpsocal.org

SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS
Provider ID: 227469
3364 BEYER BLVD
SAN YSIDRO, CA 92173-1322
Phone: (619) 662-4100
Fax: (619) 600-4870
After Hours Phone: (619) 662-4100
NPI: 1801438239
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: Y
Hours: M-F 8:00AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: https://www.syhe
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

alth.org/locations

SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER
Provider ID: 206292
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
NPI: 1952364747
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: Y
Hours: M-F
8:00AM-5:00PM
After Hours Phone: (619) 662-4100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: syhealth.org/clinics/san-ysidro-health-center

SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR
Provider ID: 227411
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1967
After Hours Phone: (619) 662-4100
License Number: A108228
NPI: 1558852947
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: Y
Hours: M-F
8:00AM-5:30PM
SA 8:30AM-2:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: syhealth.org/clinics/maternal-child-health-center

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

SPRING VALLE

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: 20A11535
NPI: 1134155377
Accepting New Patients: Yes
Min/Max Age: 0\150
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: Yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

**PROVIDER**
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: 20A14919
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

 Licence Number: A148014
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A116680
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A114181
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA 91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A113001
NPI: 1134155377
Accepting New Patients: Yes

Site English Spoken: Yes

988
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

SPRING VALLE, CA
91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A149063
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A164859
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A169342
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org
D1. 具備聯邦資質的健康診所

- **Accessibility:** CONTACT PROVIDER
- **Medical Group/IPA:** GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
- **Website:** www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: PA54588
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: NP10943
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: A55932
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: A178499
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: A55932
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: A55932
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: A55932
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: A55932
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: A55932
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org

**GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

- Provider ID: 206361
- 8788 JAMACHA RD
  - SPRING VALLE, CA
  - 91977-4035
- Phone: 619-515-2555
- After Hours Phone: 619-515-2555
- License Number: A55932
- NPI: 1134155377
- Accepting New Patients: Yes
- Site English Spoken: Yes
  - Cultural Competency: No
- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
  - Website: www.fhcsd.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A76059
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A68463
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A72005
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: A118095
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Provider ID: 206361
8788 JAMACHA RD
SPRING VALLE, CA
91977-4035
Phone: 619-515-2555
After Hours Phone: 619-515-2555
License Number: C174771
NPI: 1134155377
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA:
GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC
Website: www.fhcsd.org

Website: www.blueshieldca.com/fad

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參阅下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

<table>
<thead>
<tr>
<th>Provider ID: 206361</th>
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<tbody>
<tr>
<td>8788 JAMACHA RD</td>
</tr>
<tr>
<td>SPRING VALLEY, CA 91977</td>
</tr>
<tr>
<td>Phone: (619) 515-2555</td>
</tr>
<tr>
<td>Fax: (619) 462-5584</td>
</tr>
<tr>
<td>After Hours Phone: (619) 515-2555</td>
</tr>
<tr>
<td>NPI: 1508801069</td>
</tr>
<tr>
<td>Accepting New Patients: Yes</td>
</tr>
<tr>
<td>Min/Max Age: 0\150</td>
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<tr>
<td>Site English Spoken: Y</td>
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<td>Cultural Competency: N</td>
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<tr>
<td>American Sign Language (ASL): N</td>
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<tr>
<td>Accessibility: CONTACT PROVIDER</td>
</tr>
<tr>
<td>Medical Group/IPA: GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC</td>
</tr>
<tr>
<td>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
</tr>
</tbody>
</table>

GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

<table>
<thead>
<tr>
<th>Provider ID: 519918</th>
</tr>
</thead>
<tbody>
<tr>
<td>28477 LIZARD ROCKS RD</td>
</tr>
<tr>
<td>VALLEY CENTER, CA 92082</td>
</tr>
<tr>
<td>Phone: (760) 742-9919</td>
</tr>
<tr>
<td>Fax: (360) 462-2750</td>
</tr>
<tr>
<td>After Hours Phone: (760) 742-9919</td>
</tr>
<tr>
<td>License Number: 080000483</td>
</tr>
<tr>
<td>NPI: 1437335148</td>
</tr>
<tr>
<td>Accepting New Patients: Yes</td>
</tr>
<tr>
<td>Min/Max Age: 0\999</td>
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<tr>
<td>Site English Spoken: Y</td>
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<tr>
<td>Cultural Competency: N</td>
</tr>
<tr>
<td>Hours: M-F 8:00AM-5:00PM</td>
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<tr>
<td>American Sign Language (ASL): N</td>
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<tr>
<td>Accessibility: CONTACT PROVIDER</td>
</tr>
<tr>
<td>Medical Group/IPA: IHP of Southern Cal-PHP</td>
</tr>
<tr>
<td>Website: N/A</td>
</tr>
</tbody>
</table>

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

| 28477 LIZARD ROCKS RD |
| VALLEY CENTER, CA 92082 |
| Phone: (619) 515-2555 |
| Fax: (619) 462-5584 |
| After Hours Phone: (619) 515-2555 |
| NPI: 1508801069 |
| Accepting New Patients: Yes |
| Min/Max Age: 0\150 |
| Site English Spoken: Y |
| Cultural Competency: N |
| American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER |
| Medical Group/IPA: FAMILY HLTH CTRS INC |
| Website: www.fhcsd.org |

Email: angelad@fhcsd.org

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

| 28477 LIZARD ROCKS RD |
| VALLEY CENTER, CA 92082 |
| Phone: (619) 515-2555 |
| Fax: (619) 462-5584 |
| After Hours Phone: (619) 515-2555 |
| NPI: 1508801069 |
| Accepting New Patients: Yes |
| Min/Max Age: 0\150 |
| Site English Spoken: Y |
| Cultural Competency: N |
| American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER |
| Medical Group/IPA: IHP of Southern Cal-PHP |
| Website: N/A |

NEIGHBORHOOD HEALTHCARE

Provider ID: 519918

| 28477 LIZARD ROCKS RD |
| VALLEY CENTER, CA 92082 |
| Phone: (619) 515-2555 |
| Fax: (619) 462-5584 |
| After Hours Phone: (619) 515-2555 |
| NPI: 1508801069 |
| Accepting New Patients: Yes |
| Min/Max Age: 0\150 |
| Site English Spoken: Y |
| Cultural Competency: N |
| American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER |
| Medical Group/IPA: IHP of Southern Cal-PHP |
| Website: N/A |

992
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- Site English Spoken: Y
- Cultural Competency: N
- Hours: M-F 8:00AM-5:00PM
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: IHP of Southern Cal-PHP
- Website: N/A

VISTA

VCC DURIAN
Provider ID: 411518
105 DURIAN ST STE A
VISTA, CA 92083-6206
Phone: 844-308-5003
Fax: 760-414-3892
After Hours Phone: 844-308-5003
License Number: 1851300123
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: VCC DURIAN
- Website: N/A

VCC DURIAN
Provider ID: 411518
105 DURIAN ST STE A
VISTA, CA 92083-6206
Phone: 844-308-5003
Fax: 760-414-3892
After Hours Phone: 844-308-5003
License Number: 80000328
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: VCC DURIAN
- Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE
Provider ID: 400339
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: PA20775
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: VISTA COMMUNITY CLINIC GRAPEVINE
- Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE
Provider ID: 400339
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: DC32054
NPI: 1598122871
Accepting New Patients: Yes
- Site English Spoken: Yes
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Medical Group/IPA: VISTA COMMUNITY CLINIC GRAPEVINE
- Website: N/A

993
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

**VISTA COMMUNITY CLINIC GRAPEVINE**
Provider ID: 400339
134 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: 760-631-5004
Fax: 760-631-5000
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Grapevine
Website: N/A

**VISTA COMMUNITY CLINIC GRAPEVINE**
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5004
Fax: 760-631-5000
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Grapevine
Website: www.vistacommunityclinic.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: NP95009149
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: NP95016368
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: NP95003571
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: NP10896
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: NP95009149
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: G86902
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: C162072
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: C171929
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: C52564
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: DC32054
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

**VISTA COMMUNITY CLINIC**

Provider ID: 206338
- 1000 VALE TERRACE DR VISTA, CA 92084-5218
- Phone: 760-631-5000
- After Hours Phone: 760-631-5000
- License Number: DPM3999
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**VISTA COMMUNITY CLINIC**

Provider ID: 206338
- 1000 VALE TERRACE DR VISTA, CA 92084-5218
- Phone: 760-414-3892
- After Hours Phone: 760-414-3892
- License Number: DC31392
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**VISTA COMMUNITY CLINIC**

Provider ID: 206338
- 1000 VALE TERRACE DR VISTA, CA 92084-5218
- Phone: 760-414-3892
- After Hours Phone: 760-414-3892
- License Number: NP23217
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**VISTA COMMUNITY CLINIC**

Provider ID: 206338
- 1000 VALE TERRACE DR VISTA, CA 92084-5218
- Phone: 760-631-5000
- After Hours Phone: 760-631-5000
- License Number: A62780
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**VISTA COMMUNITY CLINIC**

Provider ID: 206338
- 1000 VALE TERRACE DR VISTA, CA 92084-5218
- Phone: 760-631-5000
- After Hours Phone: 760-631-5000
- License Number: G51286
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**VISTA COMMUNITY CLINIC**

Provider ID: 206338
- 1000 VALE TERRACE DR VISTA, CA 92084-5218
- Phone: 760-414-3892
- After Hours Phone: 760-414-3892
- License Number: NP23217
- NPI: 1598122871
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- Cultural Competency: No
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**VISTA COMMUNITY CLINIC**

Provider ID: 206338
- 1000 VALE TERRACE DR VISTA, CA 92084-5218
- Phone: 760-631-5000
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

- After Hours Phone: 760-631-5000
  - License Number: A80635
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: VISTA COMMUNITY CLINIC
  - Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
- 1000 VALE TERRACE DR
  - VISTA, CA 92084-5218
  - Phone: 760-631-5000
  - After Hours Phone: 760-631-5000
  - License Number: C143703
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: VISTA COMMUNITY CLINIC
  - Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
- 1000 VALE TERRACE DR
  - VISTA, CA 92084-5218
  - Phone: 760-631-5000
  - After Hours Phone: 760-631-5000
  - License Number: 20A13745
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: VISTA COMMUNITY CLINIC
  - Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
- 1000 VALE TERRACE DR
  - VISTA, CA 92084-5218
  - Phone: 760-631-5000
  - After Hours Phone: 760-631-5000
  - License Number: 20A18374
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: VISTA COMMUNITY CLINIC
  - Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
- 1000 VALE TERRACE DR
  - VISTA, CA 92084-5218
  - Phone: 760-631-5000
  - After Hours Phone: 760-631-5000
  - License Number: 20A8949
  - NPI: 1598122871
  - Accepting New Patients: Yes
  - Site English Spoken: Yes
  - Site Languages(s) Spoken: Spanish
  - Cultural Competency: No
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Medical Group/IPA: VISTA COMMUNITY CLINIC
  - Website: www.vistacommunityclinic.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D. Blue Shield Promise Medi-Cal 網絡內提供者清單
D1. 具備聯邦資質的健康診所

<table>
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<th>Accessibility: CONTACT PROVIDER</th>
<th>Medical Group/IPA: VISTA COMMUNITY CLINIC</th>
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<tr>
<td>Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></td>
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</tbody>
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VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: A125026
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: A173511
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: A56214
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

VISTA COMMUNITY CLINIC
Provider ID: 206338
1000 VALE TERRACE DR
VISTA, CA 92084-5218
Phone: 760-414-3892
Fax: 760-414-3892
After Hours Phone: 760-414-3892
License Number: 20A9149
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Site Languages(s) Spoken: Spanish
Cultural Competency: No
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC
Website: www.vistacommunityclinic.org

GRAPEVINE
Provider ID: 400339

999
D. Blue Shield Promise Medi-Cal 網絡內提供者清單

D1. 具備聯邦資質的健康診所

VISTA COMMUNITY CLINIC GRAPEVINE
Provider ID: 400339
135 GRAPEVINE RD
VISTA, CA 92083-4004
Phone: 760-631-5000
After Hours Phone: 760-631-5000
License Number: A60517
NPI: 1598122871
Accepting New Patients: Yes
Site English Spoken: Yes
Cultural Competency: No
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: VISTA COMMUNITY CLINIC GRAPEVINE
Website: N/A

VISTA COMMUNITY CLINIC GRAPEVINE
Provider ID: 400339
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
License Number: 080000328
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Yes
Cultural Competency: Yes
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org

VCC DURIAN
Provider ID: 411518
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (844) 308-5003
Fax: (760) 414-3892
After Hours Phone: (844) 308-5003
License Number: 080000328
NPI: 1851300123
Accepting New Patients: Yes
Min/Max Age: 0\999
Site English Spoken: Yes
Cultural Competency: Yes
Hours: M-F
8:30AM-5:00PM
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Medical Group/IPA: IHP of Southern Cal-PHP
Website: www.vistacommunityclinic.org
D2. 初級保健名錄

ALPINE

CERTIFIED NURSE PRACTITIONER
KAHL, NICHOLAS
Provider ID: 517802
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
SANDERS, JESSICA
Provider ID: 517802
Provider Gender: Female
License Number: NP23004
NPI: 1760765333
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
KAHL, NICHOLAS
Provider ID: 517802
Provider Gender: Male
License Number: NP95006360
NPI: 1821306598
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
SANDERS, JESSICA
Provider ID: 517802
Provider Gender: Female
License Number: NP23004
NPI: 1760765333
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
TODD, MIKAYLA
Provider ID: 517802
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
D2. 初級保健名錄

PRACTITIONER
TOOD, MIKAYLA
Provider ID: 517802
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
ABDULRAHIM, AHMED
Provider ID: 517802
Provider Gender: Male
License Number: DC28335
NPI: 1619040292
Provider English Spoken: Y
Provider Language(s) Spoken: Burmese
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
KELCHNER, MATTHEW
Provider ID: 517802
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
KELCHNER, MATTHEW
Provider ID: 517802
Provider Gender: Male
License Number: DC22733
NPI: 1174656755
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
FAMILY PRACTICE
BAUTISTA, LUIS
Provider ID: 517802
Provider Gender: Male
License Number: A97270
NPI: 1295712206
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, ST AGNES MEDICAL CENTER
Board Certified Specialty: No
- 1620 ALPINE BLVD STE 110
  ALPINE, CA 91901
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: www.mtnhealth.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
DUBE, BIANCA
Provider ID: 517802
Provider Gender: Female
License Number: C172036
NPI: 1740535152
- Provider English Spoken: Y
- Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
- 1620 ALPINE BLVD STE 110
  ALPINE, CA 91901
  Phone: (619) 662-4100
  Fax: (619) 205-6305
  After Hours Phone: (619) 662-4100
  Website: www.mtnhealth.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
KAUFHOLD, ANNE
Provider ID: 517802
Provider Gender: Female
License Number: A88893
NPI: 1164508073
- Provider English Spoken: Y
- Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
<table>
<thead>
<tr>
<th>Name</th>
<th>Gender</th>
<th>Provider ID</th>
<th>License Number</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Provider Language(s)</th>
<th>Cultural Competency</th>
<th>Hospital Affiliation</th>
<th>Board Certified Specialty</th>
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<tr>
<td><strong>VAN HOLLEBEKE, RACHEL</strong></td>
<td>Female</td>
<td>517802</td>
<td>A177337</td>
<td>1497217756</td>
<td>Y</td>
<td>Spanish</td>
<td>N</td>
<td>SCRIPPS</td>
<td>No</td>
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<tr>
<td><strong>VAN HOLLEBEKE, RACHEL</strong></td>
<td>Female</td>
<td>517802</td>
<td>A177337</td>
<td>1497217756</td>
<td>Y</td>
<td>Spanish</td>
<td>N</td>
<td>SCRIPPS</td>
<td>No</td>
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<td><strong>WYLIE, BLAKE</strong></td>
<td>Male</td>
<td>517802</td>
<td>1922314145</td>
<td>20A11088</td>
<td>Y</td>
<td>Spanish</td>
<td>N</td>
<td>SCRIPPS</td>
<td>No</td>
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D2. 初級保健名錄

**Provider ID:** 517802  
**Provider Gender:** Male  
**License Number:** 20A11088  
**NPI:** 1922314145  
**Provider English Spoken:** Y  
**Cultural Competency:** N  
**Hospital Affiliation:** SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS  
**Board Certified Specialty:** No  

- 1620 ALPINE BLVD STE 110  
  ALPINE, CA 91901  
- **Phone:** (619) 662-4100  
- **After Hours Phone:** (619) 662-4100  
- **Website:** www.mtnhealth.org  
- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 0\( \leq \) 150  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  

**FQHC**  
**SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,**  
**Provider ID:** 517802  
**NPI:** 1770124315  
**Provider English Spoken:** Y  
**Cultural Competency:** N  

- 1620 ALPINE BLVD STE 110  
  ALPINE, CA 91901  
- **Phone:** (619) 662-4100  
- **After Hours Phone:** (619) 662-4100  
- **Website:** www.mtnhealth.org  
- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 0\( \leq \) 150  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  

**PEDIATRICS**  
**STENSMAN, LARS,**  
**Provider ID:** 517802  
**License Number:** A158569  
**NPI:** 1659638062  
**Provider English Spoken:** Y  
**Provider Language(s) Spoken:** Danish, French, Norwegian, Swedish  
**Cultural Competency:** N  
**Board Certified Specialty:** No  

- 1620 ALPINE BLVD STE 110  
  ALPINE, CA 91901  
- **Phone:** (619) 662-4100  
- **After Hours Phone:** (619) 662-4100  
- **Website:** www.mtnhealth.org  
- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 0\( \leq \) 150  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  

**PEDIATRICS**  
**STENSMAN, LARS,**  
**Provider ID:** 517802  

---

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

**Hours:** M-F 8:00AM-5:00PM  
**FQHC**  
**SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE,**  
**Provider ID:** 517802  
**NPI:** 1770124315  
**Provider English Spoken:** Y  
**Cultural Competency:** N  

- 1620 ALPINE BLVD STE 110  
  ALPINE, CA 91901  
- **Phone:** (619) 662-4100  
- **After Hours Phone:** (619) 662-4100  
- **Website:** www.mtnhealth.org  
- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 0\( \leq \) 150  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  

**Hours:** M-F 8:00AM-5:00PM  
**PEDIATRICS**  
**STENSMAN, LARS,**  
**Provider ID:** 517802  

---

**Phone:** (619) 662-4100  
**Fax:** (619) 205-6305  
**After Hours Phone:** (619) 662-4100  
**Website:** N/A  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 0\( \leq \) 19  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  

**Hours:** M-F 8:00AM-5:00PM  
**PEDIATRICS**  
**STENSMAN, LARS,**  
**Provider ID:** 517802  
**Provider Gender:** Male  
**License Number:** A158569  
**NPI:** 1659638062  
**Provider English Spoken:** Y  
**Provider Language(s) Spoken:** Danish, French, Norwegian, Swedish  
**Cultural Competency:** N  
**Board Certified Specialty:** No  

- 1620 ALPINE BLVD STE 110  
  ALPINE, CA 91901  
- **Phone:** (619) 662-4100  
- **After Hours Phone:** (619) 662-4100  
- **Website:** www.mtnhealth.org  
- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 0\( \leq \) 150  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  

**Hours:** M-F 8:00AM-5:00PM  
**PEDIATRICS**  
**STENSMAN, LARS,**  
**Provider ID:** 517802
D2. 初級保健名錄

Provider Gender: Male
License Number: A158569
NPI: 1659638062

Provider English Spoken: Y
Provider Language(s)
Spoken: Danish, French,
Norwegian, Swedish
Cultural Competency: N
Board Certified Specialty: No

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
BAISLEY, SHAWN
Provider ID: 517802
Provider Gender: Male
License Number: PA52347
NPI: 1376936120

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

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
SHARPE, NORMA
Provider ID: 517802
Provider Gender: Female
License Number: PA20490
NPI: 1619100237

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

1620 ALPINE BLVD STE 110
ALPINE, CA 91901
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.mtnhealth.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
YOUNG, JENNIFER
Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094

Provider English Spoken: Y
D2. 初級保健名錄

Cultural Competency: N
Board Certified Specialty: No

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER
YOUNG, JENNIFER
Provider ID: 480120
Provider Gender: Female
License Number: NP95003087
NPI: 1558701094
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FQHC
TRUECARE,
Provider ID: 480120
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N

1295 CARLSBAD VILLAGE
DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM
D2. 初級保健名錄

1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
Fax: (760) 720-7204
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 480120
Provider Gender: Male
License Number: G74757
NPI: 1467485078
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 480120
Provider Gender: Male
License Number: G74757
NPI: 1467485078
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 480120
Provider Gender: Male
License Number: G74757
NPI: 1467485078
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM
D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY
POUNTNEY, MARLENE
Provider ID: 480120
Provider Gender: Female
License Number: A93248
NPI: 1174703680
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY
POUNTNEY, MARLENE
Provider ID: 480120
Provider Gender: Female
License Number: A93248
NPI: 1174703680
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY
POUNTNEY, MARLENE
Provider ID: 480120
Provider Gender: Female
License Number: A93248
NPI: 1174703680
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY
POUNTNEY, MARLENE
Provider ID: 480120
Provider Gender: Female
License Number: A93248
NPI: 1174703680
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PEDIATRICS
BURGAMY, ELIZABETH
Provider ID: 326275
Provider Gender: Female
D2. 初級保健名錄

NPI: 1164609558
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No

3257 CAMINO DE LOS COCHES STE 202 CARLSBAD, CA 92009
 Phone: (760) 633-3640
 Fax: (760) 633-3644
 After Hours Phone: (760) 633-3640
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0-19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS
IYENGAR, RADHA
Provider ID: 480120
Provider Gender: Female
License Number: A49273
NPI: 1265448112
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil
 Cultural Competency: N
 Board Certified Specialty: No

1295 CARLSBAD VILLAGE DR STE 100 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0-150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

PEDIATRICS
IYENGAR, RADHA
Provider ID: 480120
Provider Gender: Female
License Number: A49273
NPI: 1265448112
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil
 Cultural Competency: N
 Board Certified Specialty: No

1295 CARLSBAD VILLAGE DR STE 100 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0-150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

PEDIATRICS
IYENGAR, RADHA
Provider ID: 480120
Provider Gender: Female
License Number: A49273
NPI: 1265448112
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil
 Cultural Competency: N
 Board Certified Specialty: No

1295 CARLSBAD VILLAGE DR STE 100 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0-150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM

PEDIATRICS
IYENGAR, RADHA
Provider ID: 480120
Provider Gender: Female
License Number: A49273
NPI: 1265448112
 Provider English Spoken: Y
 Provider Language(s) Spoken: Hindi, Spanish, Tagalog, Tamil
 Cultural Competency: N
 Board Certified Specialty: No

1295 CARLSBAD VILLAGE DR STE 100 CARLSBAD, CA 92008
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0-150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 SA 8:00AM-2:00PM
O’CONNOR, ERICA  
Provider ID: 651599  
Provider Gender: Female  
NPI: 1134782725  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
3257 CAMINO DE LOS COCHES STE 202  
CARLSBAD, CA 92009  
Phone: (760) 633-3640  
Fax: (760) 633-3644  
After Hours Phone: (760) 633-3640  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT  
CHISWICK, GARY  
Provider ID: 480120  
Provider Gender: Male  
License Number: PA22667  
NPI: 1174964001  
Provider English Spoken: Y  
Provider Language(s): Spoken: Thai  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, RACY CHILDRENS HOSPITAL SAN DIEGO  
Board Certified Specialty: No  
1295 CARLSBAD VILLAGE DR STE 100  
CARLSBAD, CA 92008  
Phone: (760) 736-6767  
Fax: (760) 720-7204  
After Hours Phone: (760) 736-6767  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
SA 8:00AM-2:00PM
D2. 初級保健名錄

**Physicians Assistant**

**Chiswick, Gary**

Provider ID: 480120
Provider Gender: Male
License Number: PA22667
NPI: 1174964001

- Provider English Spoken: Y
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Board Affiliation: GROSSMONT HOSPITAL

1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767
Fax: (760) 720-7204

After Hours Phone: (760) 736-6767
Website: N/A

**Physicians Assistant**

**Russo, Krista**

Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192

- Provider English Spoken: Y
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Board Affiliation: GROSSMONT HOSPITAL

1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008

Phone: (760) 736-6767
Fax: (760) 720-7204

After Hours Phone: (760) 736-6767
Website: N/A

---

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT
RUSSO, KRISTA
Provider ID: 480120
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Cultural Competency: N

Board Certified Specialty: No
1295 CARLSBAD VILLAGE DR STE 100
CARLSBAD, CA 92008
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

ALLERGY IMMUNOLOGY
REDDY, SUMANA
Provider ID: 427322
Provider Gender: Female
License Number: C52581
NPI: 1053300251
Provider English Spoken: Y
Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
CHAPIN, DENISE
Provider ID: 206355
Provider Gender: Female
License Number: NP23687

Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHULA VISTA

ALLERGY IMMUNOLOGY
REDDY, SUMANA
Provider ID: 427322
Provider Gender: Female
License Number: C52581
NPI: 1053300251
Provider English Spoken: Y
Provider Language(s) Spoken: Cambodian, Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
CHAPIN, DENISE
Provider ID: 206355
Provider Gender: Female
License Number: NP23687
D2. 初級保健名錄

NPI: 1952737033
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACITIONER
CHAPIN, DENISE
Provider ID: 206355
Provider Gender: Female
License Number: NP23687
NPI: 1952737033
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACITIONER
FERNANDEZ LEYVA, JUAN
Provider ID: 206355
Provider Gender: Male
License Number: NP95001964
NPI: 1194115568
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email:
MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACITIONER
IBARRA, MARTHA
Provider ID: 427322
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
## D2. 初級保健名錄

<table>
<thead>
<tr>
<th>Name</th>
<th>ID</th>
<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>Board Certified Specialty</th>
<th>Hospital Affiliation</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL):</th>
<th>Cultural Competency:</th>
<th>Provider English Spoken:</th>
<th>Provider Language(s):</th>
<th>Medi-Cal Open Panel:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>IBARRA, MARTHA</strong></td>
<td>427322</td>
<td>Female</td>
<td>NP12112</td>
<td>1114957289</td>
<td>No</td>
<td>SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</td>
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<td>Spanish</td>
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<tr>
<td><strong>LEONARD, BEVERLY</strong></td>
<td>206355</td>
<td>Female</td>
<td>NP10943</td>
<td>1285772392</td>
<td>No</td>
<td>678 3RD AVE CHULA VISTA, CA 91910</td>
<td>0/150</td>
<td>N</td>
<td>N</td>
<td>Y</td>
<td>Spanish</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>OWEN, MICHAEL</strong></td>
<td>206355</td>
<td>Female</td>
<td>NP10943</td>
<td>1285772392</td>
<td>No</td>
<td>678 3RD AVE CHULA VISTA, CA 91910</td>
<td>0/150</td>
<td>N</td>
<td>N</td>
<td>Y</td>
<td>Spanish</td>
<td>Yes</td>
</tr>
</tbody>
</table>

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

- **Provider English Spoken**: Y
- **Provider Language(s)**: Spanish
- **Cultural Competency**: N
- **Board Certified Specialty**: No
- **251 LANDIS AVE
  CHULA VISTA, CA 91910**
  - Phone: (619) 515-2500
  - After Hours Phone: (619) 515-2500
  - Website: www.fhcsd.org
  - Email: MARTHAO@FHCSD.ORG
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - **Accessibility**: CONTACT PROVIDER

- **Certified Nurse Practitioner**
  - **Quilalang, Susan**
    - Provider ID: 427322
    - Provider Gender: Female
    - License Number: NP5579
    - NPI: 1841200482
    - **Accessibility**: CONTACT PROVIDER

- **Certified Nurse Practitioner**
  - **Quilalang, Susan**
    - Provider ID: 427322
    - Provider Gender: Female
    - License Number: NP5579
    - NPI: 1841200482

- **Certified Nurse Practitioner**
  - **Ross, Crystal**
    - Provider ID: 427322
    - Provider Gender: Female
    - License Number: NP95015413

---

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

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D2. 初級保健名錄

NPI: 1548683378
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org /clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
SICKLES, MAGGIE
Provider ID: 427322
Provider Gender: Female
License Number: NP22000
NPI: 1821346826
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 678 3RD AVE
 CHULA VISTA, CA 91910
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org /clinics/chula-vista-medical-plaza
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
ROSS, CRYSTAL
Provider ID: 427322
Provider Gender: Female
License Number: NP95015413
NPI: 1548683378
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 GROSSMONT HOSPITAL
 Board Certified Specialty: No
 678 3RD AVE
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 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
SICKLES, MAGGIE
Provider ID: 427322
Provider Gender: Female
License Number: NP22000
NPI: 1821346826
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
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 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
VEGA, TERESA
Provider ID: 206355
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 251 LANDIS AVE
 CHULA VISTA, CA 91910
 Phone: (619) 515-2500
 After Hours Phone: (619) 515-2500
 Website: www.fhcsd.org
 Email: MARTHAO@FHCSD.ORG
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL):
D2. 初級保健名錄

N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
VEGA, TERESA
Provider ID: 206355
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 251 LANDIS AVE
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email: MARTHAO@FHCSD.ORG
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
WILLIAMS, TAKISHA
Provider ID: 206355
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 251 LANDIS AVE
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email: MARTHAO@FHCSD.ORG
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE
BOSTON, LAURA
Provider ID: 206355
Provider Gender: Female
License Number: NM792
NPI: 1174553259
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 251 LANDIS AVE
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email: MARTHAO@FHCSD.ORG
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE
BOSTON, LAURA
Provider ID: 206355
Provider Gender: Female
License Number: NM792
NPI: 1174553259
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

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D2. 初級保健名錄

251 LANDIS AVE
CHULA VISTA, CA 91910
📞 Phone: (619) 515-2500
📞 After Hours Phone: (619) 515-2500
🌐 Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
ียน
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE
MARTINEZ, NANCY
Provider ID: 427322
Provider Gender: Female
License Number: NM1539
NPI: 1578576070
☐ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
📞 Phone: (619) 662-4100
📞 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
ียน
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
HASHEM, SHIVA
Provider ID: 206355
Provider Gender: Female
License Number: DC26269
NPI: 1952950776
☐ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910
📞 Phone: (619) 515-2500
📞 After Hours Phone: (619) 515-2500
🌐 Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
ียน
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

CHIROPRACTOR
KAZEM, HARON
Provider ID: 427322
Provider Gender: Male
License Number: DC33295
NPI: 1306221262
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clins/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR
PLANTE, CHARLES
Provider ID: 427322
Provider Gender: Male
License Number: DC31963
NPI: 1760464960
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clins/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
REYNOSO, ALFONSO
Provider ID: 427322
Provider Gender: Male
License Number: DC20760
NPI: 1285921627
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clins/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CHIROPRACTOR
REYNOSO, ALFONSO
Provider ID: 427322
Provider Gender: Male
License Number: DC20760
NPI: 1285921627
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY
METABOLISM DIABETES
CARRILLO, MARITZA
Provider ID: 427322
Provider Gender: Female
License Number: A163183
NPI: 1649628587
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY
METABOLISM DIABETES
CRUZ, MICHAEL
Provider ID: 427322
Provider Gender: Male
License Number: A138772
NPI: 1265851133
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ENDOCRINOLOGY
METABOLISM DIABETES
CRUZ, MICHAEL
Provider ID: 427322
Provider Gender: Male
License Number: A138772
NPI: 1265851133
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
ENDOCRINOLOGY
METABOLISM DIABETES
VINCENT, LAUREN
Provider ID: 427322
Provider Gender: Female
License Number: A134303
NPI: 1053757997
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medic al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ALANIZ, MATEO
Provider ID: 427322
Provider Gender: Male
License Number: A124388
NPI: 1700175577
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medic al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY
METABOLISM DIABETES
VINCENT, LAUREN
Provider ID: 427322
Provider Gender: Female
License Number: A134303
NPI: 1053757997
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medic al- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
AMANAT, SOROOSH
Provider ID: 427322
Provider Gender: Male
D2. 初級保健名錄

License Number: A153022
NPI: 1003279621

Provider English Spoken: Y
Provider Language(s)
  Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

FAMILY PRACTICE
ARCE GOMEZ, LAURA
Provider ID: 427322
Provider Gender: Female
License Number: A123604
NPI: 1053532986

Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: CHULA
VISTA COMM HOSP
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
AMANAT, SOROOSH
Provider ID: 427322
Provider Gender: Male
License Number: A153022
NPI: 1003279621

Provider English Spoken: Y
Provider Language(s)
  Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No

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Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
CAMPOS, MELISSA
Provider ID: 427322
Provider Gender: Female
License Number: A138474
NPI: 1427475318

Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA
VISTA COMM HOSP
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
DY, DIANE
Provider ID: 206355
Provider Gender: Female
License Number: A153344
NPI: 1467807560
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CAMPOS, MELISSA
Provider ID: 427322
Provider Gender: Female
License Number: A138474
NPI: 1427475318
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ELSAYED, MOHAMMED
Provider ID: 19561
Provider Gender: Male
NPI: 1821033424
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, German, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
330 OXFORD ST STE 106
CHULA VISTA, CA 91911
Phone: (619) 409-1802
After Hours Phone: (619) 409-1831
Fax: (619) 409-1802
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
D2. 初級保健名錄

GARCIA, KARLA
Provider ID: 427322
Provider Gender: Female
License Number: A120672
NPI: 1154647410
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- med- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GARCIA, KARLA
Provider ID: 427322
Provider Gender: Female
License Number: A120672
NPI: 1154647410
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- med- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

HUBLEY, PAUL
Provider ID: 206355
Provider Gender: Male
License Number: A73172
NPI: 1568496974
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes

FAMILY PRACTICE
ELSAYED, MOHAMMED
Provider ID: 19561
Provider Gender: Male
NPI: 1821033424
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, German, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
330 OXFORD ST STE 106
CHULA VISTA, CA 91911
Phone: (619) 409-1802
Fax: (619) 409-1831
After Hours Phone: (619) 409-1802
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9:00AM-5:00PM
F 8:00AM-4:00PM

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9:00AM-5:00PM
F 8:00AM-4:00PM

FAMILY PRACTICE
HUBLEY, PAUL
Provider ID: 206355
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Board Certified Specialty: No
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Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
D2. 初級保健名錄

Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
HUBLEY, PAUL
Provider ID: 206355
Provider Gender: Male
License Number: A73172
NPI: 1568496974
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
JIMENEZ, KRYSTAL
Provider ID: 427322
Provider Gender: Female
License Number: A159831
NPI: 1922531250
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
LACH, REBECCA
Provider ID: 427322
Provider Gender: Female
License Number: A177922
NPI: 1679137780
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
LACH, REBECCA
Provider ID: 427322
Provider Gender: Female
License Number: A177922
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 Cultural Competency: N
 Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
D2. 初級保健名錄

Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
LAW, KAREN
Provider ID: 427322
Provider Gender: Female
License Number: A138534
NPI: 1205253150
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
MCKENNETT, MARIANNE
Provider ID: 427322
Provider Gender: Female
License Number: G57243
NPI: 1376639666
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

FAMILY PRACTICE
MENON, POOJA
Provider ID: 427322
Provider Gender: Female
License Number: A123263
NPI: 1053600064
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
MERRILL, SARAH
Provider ID: 427322
Provider Gender: Female
License Number: A123492
NPI: 1225399512
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
MOYA, MARY
Provider ID: 427322
Provider Gender: Female
License Number: A80185
NPI: 1093844417
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
D2. 初級保健名錄

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<th>FAMILY PRACTICE</th>
<th>NGUYEN, CARIE</th>
</tr>
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<tbody>
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<td>Provider ID:</td>
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<td>Provider Gender:</td>
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<th>FAMILY PRACTICE</th>
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<tr>
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<td>License Number:</td>
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<th>FAMILY PRACTICE</th>
<th>NGUYEN, LINH</th>
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<tbody>
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<td>Provider ID:</td>
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<tr>
<td>NPI:</td>
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</table>
D2. 初級保健名錄

FAMILY PRACTICE
NGUYEN, CARIE
Provider ID: 427322
Provider Gender: Female
License Number: A106103
NPI: 1174781132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PALOMINO, MARY
Provider ID: 427322
Provider Gender: Female
License Number: A115699
NPI: 1770718975
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PEDROTTY, JOHN
Provider ID: 427322
Provider Gender: Male
License Number: G80234
NPI: 1992861629
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ACCESSIBILITY

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PEREZ, PERLITA
Provider ID: 206355
Provider Gender: Female
License Number: A119689
NPI: 1174810972
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PIEROS, JANELLE
Provider ID: 427322
Provider Gender: Female
License Number: 20A13225
NPI: 1386935914
Provider English Spoken: Y
Provider Language(s)
Spoken: Faroese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medical- plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
D2. 初級保健名錄

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
PINA, RAQUEL
Provider ID: 206355
Provider Gender: Female
License Number: A177698
NPI: 1255893368
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150 American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PISINGER, PATRICIA
Provider ID: 427322
Provider Gender: Female
License Number: A69264
NPI: 1861428302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150 American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ROSENBLATT, EUGENE
Provider ID: 427322
Provider Gender: Male
License Number: 20A9060
NPI: 1427123991
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150 American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ROSENBLATT, EUGENE
Provider ID: 427322
Provider Gender: Male
License Number: 20A9060
NPI: 1427123991
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SERPAS, SHAILA
Provider ID: 427322
Provider Gender: Female
License Number: G74728
NPI: 1124039136
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
SHAHTAJI, ALAN
Provider ID: 427322
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

**Min/Max Age:** 0\150

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

- **Accessibility:** CONTACT PROVIDER

**FAMILY PRACTICE**

**SHAHTAJI, ALAN**

Provider ID: 427322  
Provider Gender: Male  
License Number: 20A11087  
NPI: 1972751089

- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR, UCSD LA JOLLA

**JOHN SALLY THORNTON**

Provider ID: 427322  
Provider Gender: Male  
License Number: G72486  
NPI: 1396754131

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

**TALAVERA, GREGORY**

Provider ID: 427322  
Provider Gender: Male  
License Number: A40061  
NPI: 1740337161

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Min/Max Age: 0\150

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

- **Accessibility:** CONTACT PROVIDER

**Hours:** M-F 8:00AM-5:00PM

**Board Certified Specialty:** No

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

**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0\150

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

- **Accessibility:** CONTACT PROVIDER

**FAMILY PRACTICE**

**SWARTH, JOHN**

Provider ID: 427322  
Provider Gender: Male  
License Number: G72486  
NPI: 1396754131

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Min/Max Age: 0\150

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

- **Accessibility:** CONTACT PROVIDER

**FAMILY PRACTICE**

**SWARTH, JOHN**

Provider ID: 427322  
Provider Gender: Male  
License Number: G72486  
NPI: 1396754131

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Min/Max Age: 0\150

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

- **Accessibility:** CONTACT PROVIDER

**FAMILY PRACTICE**

**SWARTH, JOHN**

Provider ID: 427322  
Provider Gender: Male  
License Number: G72486  
NPI: 1396754131

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Min/Max Age: 0\150

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

- **Accessibility:** CONTACT PROVIDER

**FAMILY PRACTICE**

**SWARTH, JOHN**

Provider ID: 427322  
Provider Gender: Male  
License Number: G72486  
NPI: 1396754131

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Min/Max Age: 0\150

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

- **Accessibility:** CONTACT PROVIDER

**FAMILY PRACTICE**

**SWARTH, JOHN**

Provider ID: 427322  
Provider Gender: Male  
License Number: G72486  
NPI: 1396754131

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Min/Max Age: 0\150

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

- **Accessibility:** CONTACT PROVIDER

**FAMILY PRACTICE**

**SWARTH, JOHN**

Provider ID: 427322  
Provider Gender: Male  
License Number: G72486  
NPI: 1396754131

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Min/Max Age: 0\150

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

- **Accessibility:** CONTACT PROVIDER

**FAMILY PRACTICE**

**SWARTH, JOHN**

Provider ID: 427322  
Provider Gender: Male  
License Number: G72486  
NPI: 1396754131

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER

Min/Max Age: 0\150

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

- **Accessibility:** CONTACT PROVIDER
### FAMILY PRACTICE

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<th>Name</th>
<th>ID</th>
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<td>1740337161</td>
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<td>Spanish</td>
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<td>678 3RD AVE</td>
<td>(619) 662-4100</td>
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<td>M-F 8:00AM-5:00PM</td>
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<td>427322</td>
<td>Male</td>
<td>A41486</td>
<td>1427126648</td>
<td>Y</td>
<td>Spanish</td>
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<td>No</td>
<td>678 3RD AVE</td>
<td>(619) 662-4100</td>
<td>(619) 662-4100</td>
<td><a href="http://www.syhealth.org/clinics/chula-vista-medical-plaza">www.syhealth.org/clinics/chula-vista-medical-plaza</a></td>
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<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
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<td>TEE, ALEXANDRA</td>
<td>427322</td>
<td>Female</td>
<td>A164392</td>
<td>1881198406</td>
<td>Y</td>
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<td>N</td>
<td>No</td>
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<td>(619) 662-4100</td>
<td>(619) 662-4100</td>
<td><a href="http://www.syhealth.org/clinics/chula-vista-medical-plaza">www.syhealth.org/clinics/chula-vista-medical-plaza</a></td>
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<td>0\150</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
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D2. 初級保健名錄

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
TREJO, RAUL
Provider ID: 427322
Provider Gender: Male
License Number: A77936
NPI: 1174534184
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
VELASQUEZ, SHARON
Provider ID: 427322
Provider Gender: Female
License Number: A71304
NPI: 1972732584
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
VELASQUEZ, SHARON
Provider ID: 427322
Provider Gender: Female
License Number: A71304
NPI: 1972732584
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
FAMILY PRACTICE
WHITLEY, NICHOLAS
Provider ID: 427322
Provider Gender: Male
License Number: A118250
NPI: 1629394721
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
YOON, RYAN
Provider ID: 427322
Provider Gender: Male
License Number: A114600
NPI: 1942435144
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

\(\text{FQHC}\)
D2. 初級保健名錄

CHULA VISTA FAMILY HLTH CTR,
Provider ID: 206355
NPI: 1346480837

Provider English Spoken: Y
Cultural Competency: N

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
Fax: (619) 397-1161
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
CHULA VISTA PEDIATRICS,
Provider ID: 482034
NPI: 1326486861

Provider English Spoken: Y
Cultural Competency: N

855 3RD AVE STE 2200
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
CHULA VISTA FAMILY HLTH CTR,
Provider ID: 206355
NPI: 1346480837

Provider English Spoken: Y
Cultural Competency: N

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
Fax: (619) 397-1161
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
CHULA VISTA PEDIATRICS,
Provider ID: 482034
NPI: 1326486861

Provider English Spoken: Y
Cultural Competency: N

855 3RD AVE STE 2200
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-4:00PM

FQHC
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,
Provider ID: 417641
NPI: 1083959464

Provider English Spoken: Y
Cultural Competency: N

352 L ST
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,
Provider ID: 417641
NPI: 1083959464

Provider English Spoken: Y
Cultural Competency: N

352 L ST
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Email: chantalt@fhcsd.org

Hours: M-F 9:00AM-4:00PM
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH CHULA VISTA,
Provider ID: 427322
NPI: 1326486861
Provider English Spoken: Y
Cultural Competency: N
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-6941
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:00PM

GENERAL DENTISTRY
PHAM, QUYNH
Provider ID: 427322
Provider Gender: Female
License Number: DDS102880
NPI: 1366917353
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE
SAMI, REMAN
Provider ID: 427322
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

GENERAL PRACTICE
SAMI, REMAN
Provider ID: 427322
Provider Gender: Female
License Number: 20A19457
NPI: 1295362242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medica-
plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \u2013 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
CHEN, TSUH YIN
Provider ID: 427322
Provider Gender: Female
License Number: C55563
NPI: 1093803520
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medica-
plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \u2013 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

HEMATOLOGY / ONCOLOGY
QUIROZ, ELISA
Provider ID: 427322
Provider Gender: Female
License Number: A162816
NPI: 1932558301
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula- vista- medica-
plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \u2013 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

American Sign Language (ASL): N

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
CHEN, TSUH YIN
Provider ID: 427322
Provider Gender: Female
License Number: C55563
NPI: 1093803520
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
DALHOUMI, SARAH
Provider ID: 427322
Provider Gender: Female
License Number: A121861
NPI: 1033435383
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
HAMMETT, ERIN
Provider ID: 427322
Provider Gender: Female
License Number: 20A14025
NPI: 1467884098
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Sharp Coronado Hosp And Healthcare Ctr, Santa Barbara Cottage Hosp, Goleta Valley Cottage Hosp
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE
HAMMETT, ERIN
Provider ID: 427322
Provider Gender: Female
License Number: 20A14025

1041
D2. 初級保健名錄

NPI: 1467884098
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SANTA BARBARA COTTAGE HOSP, GOLETA VALLEY COTTAGE HOSP
- Board Certified Specialty: No
- 678 3RD AVE
- CHULA VISTA, CA 91910
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org /clinics/chula-vista-medical-plaza
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE
KAKAIYA, ROSHNI
- Provider ID: 427322
- Provider Gender: Female
- License Number: 20A19485
- NPI: 1073179529
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 678 3RD AVE
- CHULA VISTA, CA 91910
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org /clinics/chula-vista-medical-plaza
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE
VELAZQUEZ CAMARENA, MARIA
- Provider ID: 427322
- Provider Gender: Female
- License Number: A56153
- NPI: 1518965714
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
- Board Certified Specialty: No
- 340 4TH AVE STE 10
- CHULA VISTA, CA 91910
- Phone: (619) 934-2215
- Fax: (619) 500-5955
- After Hours Phone: (619) 934-2215
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TH 8:00AM-5:00PM
  F 8:00AM-4:00PM

INTERNAL MEDICINE
UWEDJOJEVWE, LETICIA
- Provider ID: 380242
- Provider Gender: Female
- NPI: 1891882221
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
- Board Certified Specialty: No
- 678 3RD AVE
- CHULA VISTA, CA 91910
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org /clinics/chula-vista-medical-plaza
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
WEN, AKI YEN CHANG
Provider ID: 427322
Provider Gender: Male
License Number: 20A12555
NPI: 1205126505
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
VELAZQUEZ CAMARENA, MARIA
Provider ID: 427322
Provider Gender: Female
License Number: A56153
NPI: 1518965714
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
ALIMONOS, LYSISTRATI
Provider ID: 206355
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

**OBSTETRICS / GYNECOLOGY**

**ALIMONOS, LYSISTRATI**
Provider ID: 206355  
Provider Gender: Female  
License Number: 20A14919  
NPI: 1619397031

- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
- Board Certified Specialty: No
- 251 LANDIS AVE  
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500  
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email: MARTHAO@FHCSD.ORG
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

**CARTER, KHALIL**
Provider ID: 206355  
Provider Gender: Male  
License Number: A113001  
NPI: 1225231582

- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
- Board Certified Specialty: No
- 251 LANDIS AVE  
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500  
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email: MARTHAO@FHCSD.ORG
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

**BUECHNER, CHARLENE**
Provider ID: 206355  
Provider Gender: Female  
License Number: A68463  
NPI: 1376663831

- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
- Board Certified Specialty: No
- 251 LANDIS AVE  
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500  
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email: MARTHAO@FHCSD.ORG
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

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

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 206355
Provider Gender: Male
License Number: A113001
NPI: 1225231582
❖ Provider English Spoken: Y
❖ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
❖ Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
❖ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 206355
Provider Gender: Female
License Number: A118095
NPI: 1073701041
❖ Provider English Spoken: Y
❖ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
❖ Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
❖ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
Provider ID: 206355
Provider Gender: Female
License Number: A163464
NPI: 1326531401
❖ Provider English Spoken: Y
❖ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
❖ Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
❖ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 206355
Provider Gender: Female
License Number: A118095
NPI: 1073701041
❖ Provider English Spoken: Y
❖ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
❖ Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**CHAKRABARTI, PRIYA**
Provider ID: 206355
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**DE MIK, TRAVIS**
Provider ID: 206355
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**DORUELO, ASHLEY**
Provider ID: 206355
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR, BEATRIZ
Provider ID: 206355
Provider Gender: Female
License Number: A148014
NPI: 1457794752
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

OBSTETRICS / GYNECOLOGY
HANLEY, LAUREN
Provider ID: 206355
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
HANLEY, LAUREN
Provider ID: 206355
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1047
D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LIPSCHITZ, LISA
Provider ID: 206355
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
Provider ID: 206355
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
Provider ID: 206355
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
D2. 初級保健名錄

- Provider Language(s)
  Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation:
  GROSSMONT HOSPITAL,
  SCRIPPS MERCY HOSPITAL,
  SCRIPPS MERCY HOSPITAL
- CHULA VISTA
  Board Certified Specialty: No
  251 LANDIS AVE
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email:
  MARTHAO@FHCSD.ORG
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
MELENDEZ BERRIOS, IARA DELE

- Provider ID: 206355
- Provider Gender: Female
- License Number: A114181
- NPI: 1740514249
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish
  Cultural Competency: N
  Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
  GROSSMONT HOSPITAL
  Board Certified Specialty: No
  251 LANDIS AVE
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email:
  MARTHAO@FHCSD.ORG
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:30AM-5:30PM

- Provider ID: 206355
  Provider Gender: Female
  License Number: A114181
  NPI: 1740514249
  Provider English Spoken: Y
  Provider Language(s)
  Spoken: Spanish
  Cultural Competency: N
  Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
  GROSSMONT HOSPITAL
  Board Certified Specialty: No
  678 3RD AVE
  CHULA VISTA, CA 91910
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: www.syhealth.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
MENDEZ, DIEGO

- Provider ID: 427322
- Provider Gender: Male
- License Number: A47906
- NPI: 1437181922
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish
  Cultural Competency: N
  Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEDICAL CENTER
  Board Certified Specialty: No
  678 3RD AVE
  CHULA VISTA, CA 91910
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: www.syhealth.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

PROVIDER

OBSTETRICS / GYNECOLOGY
MENDEZ, DIEGO
Provider ID: 427322
Provider Gender: Male
License Number: A47906
NPI: 1437181922

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER
- Board Certified Specialty: No
- 678 3RD AVE
  CHULA VISTA, CA 91910
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: www.syhealth.org /clinics/chula-vista-medical-plaza
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

RODRIGUEZ JEREZ, ROBERTO
Provider ID: 206355
Provider Gender: Male
License Number: A154298
NPI: 1710316450

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
- Board Certified Specialty: No
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email: MARTHAO@FHCSD.ORG
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
SAPRA, SONIA
Provider ID: 206355
Provider Gender: Female
License Number: A164859
NPI: 1952751711

- Provider English Spoken: Y
- Provider Language(s) Spoken: Hindi
- Cultural Competency: N
- Hospital Affiliation: MERCY HOSPITAL
- Board Certified Specialty: No
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email:

OBSTETRICS / GYNECOLOGY

RODRIGUEZ JEREZ, ROBERTO
Provider ID: 206355
Provider Gender: Male
License Number: A154298
NPI: 1710316450

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
- Board Certified Specialty: No
- 251 LANDIS AVE
  CHULA VISTA, CA 91910
  Phone: (619) 515-2500
  After Hours Phone: (619) 515-2500
  Website: www.fhcsd.org
  Email:
D2. 初級保健名錄

MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
SAPRA, SONIA
Provider ID: 206355
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG

SHORT, ABIADE
Provider ID: 427322
Provider Gender: Male
License Number: A114893
NPI: 1750559589
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza

MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
SEFA-BOAKYE, KOFI
Provider ID: 427322
Provider Gender: Male
License Number: G59670
NPI: 1902993660
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza

OBSTETRICS / GYNECOLOGY
SEFA-BOAKYE, KOFI
Provider ID: 427322
Provider Gender: Male
License Number: G59670
NPI: 1902993660
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

al-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
SHORT, ABIADE
Provider ID: 427322
Provider Gender: Male
License Number: A114893
NPI: 1750559589
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 515-2500
Website: www.syhealth.org
Email: MARTHAO@FHCSD.ORG

OBSTETRICS / GYNECOLOGY
STABEN, REBECCA
Provider ID: 206355
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.syhealth.org
Email: MARTHAO@FHCSD.ORG

OBSTETRICS / GYNECOLOGY
TRUJILLO, JENNIFER
Provider ID: 206355
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Email: MARTHAO@FHCSD.ORG

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
### OBSTETRICS / GYNECOLOGY

**TRUJILLO, JENNIFER**  
Provider ID: 427322  
Provider Gender: Female  
License Number: 20A8204  
NPI: 1053407593  
- Provider English Spoken: Y  
- Provider Language(s): Spanish  
- Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR  
Board Certified Specialty: No  
- 251 LANDIS AVE  
  CHULA VISTA, CA 91910  
- Phone: (619) 662-4100  
- After Hours Phone: (619) 662-4100  
- Website: www.syhealth.org/clinics/chula-vista-medical-plaza  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:30AM-5:30PM

**WINESBURG, JENNIFER**  
Provider ID: 206355  
Provider Gender: Female  
License Number: 20A11535  
NPI: 1811162456  
- Provider English Spoken: Y  
- Provider Language(s): Spanish  
- Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR  
GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR  
Board Certified Specialty: No  
- 251 LANDIS AVE  
  CHULA VISTA, CA 91910  
- Phone: (619) 515-2500  
- After Hours Phone: (619) 515-2500  
- Website: www.syhealth.org/clinics/chula-vista-medical-plaza  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:30AM-5:30PM

**ZIEG, ALAN**  
Provider ID: 206355  
Provider Gender: Male  
License Number: G78814  
NPI: 1699790634  
- Provider English Spoken: Y  
- Provider Language(s): Spanish  
- Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
- 251 LANDIS AVE  
  CHULA VISTA, CA 91910  
- Phone: (619) 515-2500  
- After Hours Phone: (619) 515-2500  
- Website: www.syhealth.org/clinics/chula-vista-medical-plaza  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

ZIEG, ALAN
Provider ID: 206355
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

PAPASTERGIOU, GEORGIOS
Provider ID: 427322
Provider Gender: Male
License Number: A1790054393
NPI: 1790054393
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY

MANI, NASRIN
Provider ID: 427322
Provider Gender: Female
License Number: A40473
NPI: 1023061314
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Faroese, Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY
PAPASTERGIOU, GEORGIOS
Provider ID: 427322
Provider Gender: Male
License Number: A127706
NPI: 1790054393
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY
PONS, MAURICIO
Provider ID: 427322
Provider Gender: Male
License Number: A87650
NPI: 1376723759
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY
SKAF, AYHAM
Provider ID: 427322
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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PEDIATRICS

AKASHI, MARC
Provider ID: 163322
Provider Gender: Male
NPI: 1205002417

AKASHI, MARC
Provider ID: 163322
Provider Gender: Male
NPI: 1205002417

PEDIATRICS

ATIENZA, PAMELA
Provider ID: 106987
Provider Gender: Female
NPI: 1417916107

Provider English Spoken: Y
Provider Language(s): Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No

PASSOVER, JEREMIAH
Provider ID: 735630
Provider Gender: Male
NPI: 1094511428

Provider English Spoken: Y
Provider Language(s): Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No

PASSOVER, JEREMIAH
Provider ID: 735630
Provider Gender: Male
NPI: 1094511428

Provider English Spoken: Y
Provider Language(s): Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No

769 MEDICAL CENTER CT
STE 300
CHULA VISTA, CA 91911
Phone: (619) 482-3090
Fax: (619) 482-3090

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

PEDIATRICS

BARBADILLO, FERDINAND
Provider ID: 70456
Provider Gender: Male
NPI: 1982662193

Provider English Spoken: Y
Provider Language(s): Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No

890 EASTLAKE PKWY STE
200
CHULA VISTA, CA 91914
Phone: (619) 656-6817
Fax: (619) 656-6908

Hours: M-F 8:00AM-5:00PM

PEDIATRICS

ATIENZA, PAMELA
Provider ID: 106987
Provider Gender: Female
NPI: 1417916107

Provider English Spoken: Y
Provider Language(s): Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No

890 EASTLAKE PKWY STE
200
CHULA VISTA, CA 91914
Phone: (619) 656-6817
Fax: (619) 656-6908

After Hours Phone: (619)
D2. 初級保健名錄

656-6817
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS
BROUDY, ABRAHAM
Provider ID: 109328
Provider Gender: Male
NPI: 1528039526
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, RACY CHILDREN’S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDREN’S HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, RADY CHILDREN’S HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
Phone: (619) 656-3040
Fax: (619) 656-3045
After Hours Phone: (619) 656-3040
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
CAPETANAKIS, ELENI
Provider ID: 89610
Provider Gender: Female
NPI: 1346211554
Provider English Spoken: Y
Provider Language(s) Spoken: Greek, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, RACY CHILDREN’S HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, CHULA VISTA, RACY CHILDREN’S HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
CORDOBA, MIGUEL
Provider ID: 88187
Provider Gender: Male
NPI: 1053382176
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
D2. 初級保健名錄

Website: www.syhealth.org /clinics/chula- vista- medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
DONG, TAMMY
Provider ID: 427322
Provider Gender: Female
License Number: A66903
NPI: 1386655413
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
865 3RD AVE
CHULA VISTA, CA 91911
Phone: (619) 426-7910
After Hours Phone: (619) 426-7910
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FLETCHER, EMILY
Provider ID: 232312
Provider Gender: Female
NPI: 1780935940
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp CHULA VISTA MED CTR, MERCY HOSPITAL BAKERSFIELD, Rady CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No
865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FLORES, ERNEST
Provider ID: 658652
Provider Gender: Male
NPI: 1043848807
Provider English Spoken: Y
Cultural Competency: N
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp CHULA VISTA MED CTR, MERCY HOSPITAL BAKERSFIELD, Rady CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
Phone: (619) 656-3040
Fax: (619) 656-3045
After Hours Phone: (619) 656-3040
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
### D2. 初級保健名錄

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<thead>
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<th>PROVIDER</th>
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<tr>
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<td>SA 8:00AM-0:00PM</td>
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<td>Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR</td>
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<td></td>
<td>1741 EASTLAKE PKWY STE 107</td>
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<td></td>
<td>Phone: (619) 482-1700</td>
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<tr>
<td></td>
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<tr>
<td></td>
<td>752 MEDICAL CENTER CT STE 210</td>
</tr>
<tr>
<td></td>
<td>Phone: (619) 656-0206</td>
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<tr>
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<td>Fax: (619) 656-8936</td>
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<tr>
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<td>After Hours Phone: (619) 656-0206</td>
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### PEDIATRICS

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<td>501 CHULA VISTA, CA 91913</td>
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<tr>
<td></td>
<td>Phone: (619) 271-4059</td>
</tr>
<tr>
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### PEDIATRICS

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<td>Phone: (619) 271-4059</td>
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### PEDIATRICS

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<td>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR</td>
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<td>Board Certified Specialty: No</td>
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<tr>
<td></td>
<td>855 3RD AVE STE 2200</td>
</tr>
<tr>
<td></td>
<td>Phone: (619) 574-4100</td>
</tr>
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<td></td>
<td>After Hours Phone: (619) 574-4100</td>
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<td>Hours: M-F 8:00AM-5:00PM</td>
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D2. 初級保健名錄

PEDIATRICS
GHAREMANI, SIMIN
Provider ID: 482034
Provider Gender: Female
License Number: C51110
NPI: 1508904657
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
HOLICK, NATALIE
Provider ID: 473802
Provider Gender: Female
NPI: 1558716845
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
GHAREMANI, SIMIN
Provider ID: 634787
Provider Gender: Female
NPI: 1508904657
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
ISAIAS, AGNELA
Provider ID: 482034
Provider Gender: Female
License Number: A82912
NPI: 1790772572
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
Fax: (619) 426-2337
After Hours Phone: (619) 426-7910
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1060
D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
855 3RD AVE STE 2200
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
KORSAND, SID
Provider ID: 482034
Provider Gender: Male
License Number: A49591
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Turkish
Cultural Competency: N
Board Certified Specialty: No
855 3RD AVE STE 2200
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
KORSAND, SID
Provider ID: 467596
Provider Gender: Female
NPI: 1811221641
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, RAY CHILDRENS HOSPITAL SAN DIEGO, HUNTINGTON MEMORIAL HOSPITAL, USC Arcadia Hospital
Board Certified Specialty: No
769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090

PEDIATRICS
KORSAND, SID
Provider ID: 482034
Provider Gender: Male
License Number: A49591
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Turkish
Cultural Competency: N
Board Certified Specialty: No
855 3RD AVE STE 2200
CHULA VISTA, CA 91911
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
KORSAND, SID
Provider ID: 634788
Provider Gender: Male
NPI: 1588634513
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Turkish
Cultural Competency: N
Board Certified Specialty: No
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

**PEDIATRICS**

**MCMAHON, SHARON**
Provider ID: 648721
Provider Gender: Female
NPI: 1487279246
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No

865 THIRD AVE STE 101
CHULA VISTA, CA 91911
- Phone: (619) 426-7910
- Fax: (619) 426-2337
- After Hours Phone: (619) 426-7910
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
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**MISTRY, CHETAN**
Provider ID: 86439
Provider Gender: Male
NPI: 1467505834
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL
- Board Certified Specialty: No

769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
- Phone: (619) 482-3090
- Fax: (619) 482-7350
- After Hours Phone: (619) 482-3090
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM

**MOSQUERA, DIANA**
Provider ID: 371232
Provider Gender: Female
NPI: 1144238098
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
- Board Certified Specialty: No

865 3RD AVE STE 101
CHULA VISTA, CA 91911
- Phone: (619) 426-7910
- After Hours Phone: (619) 426-7910
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM

**NGUYEN, TRUC**
Provider ID: 78518
Provider Gender: Female
NPI: 1881884054
- Provider English Spoken: Y
- Provider Language(s) Spoken: Vietnamese
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, WASHINGTON HOSPITAL, SCRIPPS MERCY HOSPITAL

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Board Certified Specialty: No
2440 FENTON ST STE 100
CHULA VISTA, CA 91914
Phone: (619) 656-3040
Fax: (619) 656-3045
After Hours Phone: (619) 656-3040
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
PIANSAY, MARIA CORAZON
Provider ID: 427322
Provider Gender: Female
License Number: A93785
NPI: 1669680351
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SALAZAR, JUANITA
Provider ID: 206355
Provider Gender: Female
License Number: A78355
NPI: 1912938325
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SALAZAR, JUANITA
Provider ID: 206355
Provider Gender: Female
License Number: A78355
NPI: 1912938325
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog,
Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No
251 LANDIS AVE
D2. 初級保健名錄

PEDIATRICS
SANTIAGO, ROXANE
Provider ID: 269279
Provider Gender: Female
NPI: 1033461801
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Urdu
Cultural Competency: N
Hospital Affiliation: Rady Children’s Hospital San Diego, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, UCSF Benioff Children’s Hospital Oakland, Scripps Mercy Hospital
Board Certified Specialty: No
865 3RD AVE STE 101
CHULA VISTA, CA 91911
Phone: (619) 426-7910
After Hours Phone: (619) 426-2337
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

American Sign Language (ASL): License Number: A45942
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Urdu
Cultural Competency: N
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Scripps Mercy Hospital
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
VALENCIA, MARILES
Provider ID: 104059
Provider Gender: Female
NPI: 1275541625
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: Scripps Mercy Hospital Chula Vista, Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Rady Children’s Hospital San Diego
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

DIEGO, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
1741 EASTLAKE PKWY STE 107
CHULA VISTA, CA 91915
Phone: (619) 482-1700
Fax: (619) 475-4578
After Hours Phone: (619) 482-1700
Website: N/A
Email: PEDIATRICSINPARADISE@YAHOO.COM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
ZARGAR, SHABNAM
Provider ID: 371075
Provider Gender: Female
NPI: 1417256074
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, DESERT REGIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
769 MEDICAL CENTER CT STE 300
CHULA VISTA, CA 91911
Phone: (619) 482-3090
Fax: (619) 482-7350
After Hours Phone: (619) 482-3090
Website: N/A
 Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
BALDONADO, ANALICIA
Provider ID: 417641
Provider Gender: Female
License Number: PA61683
NPI: 1215477765
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
352 L ST
CHULA VISTA, CA 91911
Phone: (619) 515-2325
After Hours Phone: (619) 515-2325
Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

1065
D2. 初級保健名錄

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
INDA, PRISCILLA
Provider ID: 427322
Provider Gender: Female
License Number: PA54404
NPI: 1679008379
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
MENDEZ, JESUS
Provider ID: 427322
Provider Gender: Male
License Number: PA13796
NPI: 1023202108
 Provider English Spoken: Y
 Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
QUICK, ELISABETH
Provider ID: 206355
Provider Gender: Female
License Number: PA21591
NPI: 1790055010
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

PHYSICIANS ASSISTANT

REVELES, DIANA
Provider ID: 417641
Provider Gender: Female
License Number: PA19306
NPI: 1548455405
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

 PODIATRIST

MANCHEL, BRUCE
Provider ID: 427322
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.fhcsd.org
Email: chantalt@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
🏥 Provider English Spoken: Y
🏥 Provider Language(s) Spoken: Spanish
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
📞 Phone: (619) 662-4100
📞 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
🔒 Accessibility: CONTACT PROVIDER

PODIATRIST
SCHNEIDER, SARAH
Provider ID: 206355
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
🏥 Provider English Spoken: Y
🏥 Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
📞 Phone: (619) 515-2500
📞 After Hours Phone: (619) 515-2500
🌐 Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
🔒 Accessibility: CONTACT PROVIDER

REGISTERED NURSE LICENSED VOCATIONAL NURSE
QUILALANG, SUSAN
Provider ID: 427322
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
🏥 Provider English Spoken: Y
🏥 Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
📞 Phone: (619) 662-4100
📞 After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
🔒 Accessibility: CONTACT PROVIDER

REGISTERED NURSE LICENSED
1068
D2. 初級保健名錄

VOCATIONAL NURSE
QUILALANG, SUSAN
Provider ID: 427322
Provider Gender: Female
License Number: NP5579
NPI: 1841200482
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
AMAYA, RICARDO
Provider ID: 206355
Provider Gender: Male
License Number: PT37189
NPI: 1437445566
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
CUMMINGS, GEORGE
Provider ID: 206355
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED NURSE LICENSED
VOCATIONAL NURSE
QUILALANG, SUSAN
Provider ID: 427322
Provider Gender: Female
License Number: RN371480
NPI: 1841200482
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1069
D2. 初級保健名錄

REGISTERED PHYSICAL THERAPIST
CUMMINGS, GEORGE
Provider ID: 206355
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST
GONZALES, MICHELLE
Provider ID: 206355
Provider Gender: Female
License Number: PT291706
NPI: 1548714652
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST
GEORGE, JENNIFER
Provider ID: 206355
Provider Gender: Female
License Number: PT294245
NPI: 1215402177
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
MIGNEA, DAVID
Provider ID: 206355
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

RODRIGUEZ, CASSANDRA
Provider ID: 206355
Provider Gender: Female
License Number: PT292823
NPI: 1770025595
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
251 LANDIS AVE
CHULA VISTA, CA 91910
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: www.fhcsd.org
Email: MARTHAO@FHCSD.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

RHEUMATOLOGY
REDDY, DANA
Provider ID: 427322
Provider Gender: Female
License Number: A115598
NPI: 1144538778
D2. 初級保健名錄

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SHARP
  CHULA VISTA MED CTR,
  SCRIPPS MERCY HOSPITAL,
  SHARP MEMORIAL HOSPITAL,
  SCRIPPS MEMORIAL
  HOSPITAL, SCRIPPS
  MEMORIAL HOSPITAL

ENCINITAS
Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST
CABADING, DOREEN
Provider ID: 427322
Provider Gender: Female
License Number: SP18192
NPI: 1043507585
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No

678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
/clinics/chula-vista-medical-plaza
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

RHEUMATOLOGY
REDDY, DANA
Provider ID: 427322
Provider Gender: Female
License Number: A115598
NPI: 1144538778
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SHARP
  CHULA VISTA MED CTR,
  SCRIPPS MERCY HOSPITAL,
  SHARP MEMORIAL HOSPITAL,
  SCRIPPS MEMORIAL
  HOSPITAL, SCRIPPS
  MEMORIAL HOSPITAL

EL CAJON

SPEECH PATHOLOGIST
REDDY, SUMANA
Provider ID: 569910
Provider Gender: Female
License Number: C52581
NPI: 1053300251
- Provider English Spoken: Y
  Provider Language(s)
  Spoken: Cambodian, Hindi,
  Spanish, Telugu
- Cultural Competency: N
- Hospital Affiliation:
  GROSSMONT HOSPITAL
- Board Certified Specialty: No

ALLERGY IMMUNOLOGY
REDDY, SUMANA
Provider ID: 569910
Provider Gender: Female
License Number: C52581
NPI: 1053300251
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Cambodian, Hindi,
  Spanish, Telugu
- Cultural Competency: N
- Hospital Affiliation:
  GROSSMONT HOSPITAL
- Board Certified Specialty: No
### D2. 初級保健名錄

- **875 EL CAJON BLVD**  
  EL CAJON, CA 92020  
  Provider ID: 569910  
  Provider Gender: Female  
  License Number: C52581  
  NPI: 1053300251  
  Provider English Spoken: Y  
  Spoken: Cambodian, Hindi, Spanish, Telugu  
  Cultural Competency: N  
  Hospital Affiliation: GROSSMONT HOSPITAL  
  Board Certified Specialty: No  
  Medi-Cal Open Panel: Yes  
  Min/Max Age: 0\150  
  American Sign Language (ASL): N  
  Accessibility: CONTACT PROVIDER

- **Belen, Nezer**  
  Provider ID: 418340  
  Provider Gender: Male  
  License Number: NP95009292  
  NPI: 1386120723  
  Provider English Spoken: Y  
  Cultural Competency: N  
  Board Certified Specialty: No  
  525 E MAIN ST  
  EL CAJON, CA 92020  
  Phone: (619) 515-2498  
  After Hours Phone: (619) 515-2498  
  Website: www.fhcsd.org  
  Email: janellek@fhcsd.org  
  Medi-Cal Open Panel: Yes  
  Min/Max Age: 0\150  
  American Sign Language (ASL): N  
  Accessibility: CONTACT PROVIDER  
  Hours: M-F 8:30AM-5:30PM

- **Driscoll, Susan**  
  Provider ID: 569910  
  Provider Gender: Female  
  License Number: NP95012943  
  NPI: 1477755684  
  Provider English Spoken: Y  
  Cultural Competency: N  
  Board Certified Specialty: No  
  875 EL CAJON BLVD  
  EL CAJON, CA 92020  
  Phone: (619) 662-4100  
  After Hours Phone: (619) 662-4100  
  Website: www.syhealth.org  
  Medi-Cal Open Panel: Yes  
  Min/Max Age: 0\150  
  American Sign Language (ASL): N  
  Accessibility: CONTACT PROVIDER  
  Hours: M-F 8:00AM-5:00PM

- **Driscoll, Susan**  
  Provider ID: 569910  
  Provider Gender: Female  
  License Number: NP95012943  
  NPI: 1477755684  
  Provider English Spoken: Y  
  Cultural Competency: N  
  Board Certified Specialty: No  
  875 EL CAJON BLVD  
  EL CAJON, CA 92020  
  Phone: (619) 662-4100  
  After Hours Phone: (619) 662-4100  
  Website: www.syhealth.org  
  Medi-Cal Open Panel: Yes  
  Min/Max Age: 0\150  
  American Sign Language (ASL): N  
  Accessibility: CONTACT PROVIDER  
  Hours: M-F 8:00AM-5:00PM

---

D2. 初級保健名錄

- **875 EL CAJON BLVD**  
  EL CAJON, CA 92020  
  Phone: (619) 662-4100  
  After Hours Phone: (619) 662-4100  
  Website: www.syhealth.org  
  Medi-Cal Open Panel: Yes  
  Min/Max Age: 0\150  
  American Sign Language (ASL): N  
  Accessibility: CONTACT PROVIDER

**Allergy Immunology**

**Reddy, Sumana**  
Provider ID: 569910  
Provider Gender: Female  
License Number: C52581  
NPI: 1053300251  
Provider English Spoken: Y  
Spoken: Cambodian, Hindi, Spanish, Telugu  
Cultural Competency: N

**Certified Nurse Practitioner**

**Belen, Nezer**  
Provider ID: 418340  
Provider Gender: Male  
License Number: NP95009292  
NPI: 1386120723  
Provider English Spoken: Y  
Cultural Competency: N

**Certified Nurse Practitioner**

**Belen, Nezer**  
Provider ID: 418340  
Provider Gender: Male  
License Number: NP95009292  
NPI: 1386120723  
Provider English Spoken: Y  
Cultural Competency: N

**Certified Nurse Practitioner**

**Belen, Nezer**  
Provider ID: 418340  
Provider Gender: Male  
License Number: NP95009292  
NPI: 1386120723  
Provider English Spoken: Y  
Cultural Competency: N

**Certified Nurse Practitioner**

**Belen, Nezer**  
Provider ID: 418340  
Provider Gender: Male  
License Number: NP95009292  
NPI: 1386120723  
Provider English Spoken: Y  
Cultural Competency: N
D2. 初級保健名錄

- **Provider Language(s)**
  - Spoken: Spanish
  - Cultural Competency: N
- **Board Certified Specialty**: No
- **875 EL CAJON BLVD**
  - **EL CAJON, CA 92020**
  - **Phone**: (619) 662-4100
  - **After Hours Phone**: (619) 662-4100
  - **Website**: www.syhealth.org
  - **Medi-Cal Open Panel**: Yes
  - **Min/Max Age**: 0\150
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER
  - **Hours**: M-F 8:30AM-5:30PM

**CERTIFIED NURSE PRACTITIONER**

**GARCIA, JOHNNY**
- **Provider ID**: 418340
- **Provider Gender**: Male
- **License Number**: NP95007000
- **NPI**: 1932622156
- ** Provider English Spoken**: Y
- **Provider Language(s)**
  - Spoken: Spanish
  - Cultural Competency: N
- **Board Certified Specialty**: No
- **525 E MAIN ST**
  - **EL CAJON, CA 92020**
  - **Phone**: (619) 515-2498
  - **After Hours Phone**: (619) 515-2498
  - **Website**: www.fhcsd.org
  - **Email**: janellek@fhcsd.org
  - **Medi-Cal Open Panel**: Yes
  - **Min/Max Age**: 0\150
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER
  - **Hours**: M-F 8:00AM-5:00PM

**CERTIFIED NURSE PRACTITIONER**

**HAMID, WAHIDA**
- **Provider ID**: 569910
- **Provider Gender**: Female
- **License Number**: NP95001707
- **NPI**: 1164812293
- **Provider English Spoken**: Y
- **Provider Language(s)**
  - Spoken: Spanish
  - Cultural Competency: N
- **Board Certified Specialty**: No
- **875 EL CAJON BLVD**
  - **EL CAJON, CA 92020**
  - **Phone**: (619) 662-4100
  - **After Hours Phone**: (619) 662-4100
  - **Website**: www.syhealth.org
  - **Medi-Cal Open Panel**: Yes
  - **Min/Max Age**: 0\150
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**HARPEL, SHERYL**
D2. 初級保健名錄

Provider ID: 569910
Provider Gender: Female
License Number: NP95009329
NPI: 1780177147
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

CERTIFIED NURSE PRACTITIONER
HETTIG, JUDITH
Provider ID: 418340
Provider Gender: Female
License Number: NP3439
NPI: 1396815866
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
HETTIG, JUDITH
Provider ID: 418340
Provider Gender: Female
License Number: NP3439
NPI: 1396815866
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

525 E MAIN ST
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Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
JENSEN, ADRIENNE
Provider ID: 569910
Provider Gender: Female
License Number: NP95023148
NPI: 1184389934
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego, UCSD Medical CTR
Board Certified Specialty: No

875 EL CAJON BLVD
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Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
JENSEN, ADRIENNE
Provider ID: 569910
Provider Gender: Female
License Number: NP95023148
NPI: 1184389934
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

525 E MAIN ST
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Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
JENSEN, ADRIENNE
Provider ID: 569910
Provider Gender: Female
License Number: NP95023148
NPI: 1184389934
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

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Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
JENSEN, ADRIENNE
Provider ID: 569910
Provider Gender: Female
License Number: NP95023148
NPI: 1184389934
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PRACTITIONER
JENSEN, ADRIENNE
Provider ID: 569910
Provider Gender: Female
License Number: NP95023148
NPI: 1184389934
.Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego, UCSD Medical Ctr
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
KELLOGG, KRISTEN
Provider ID: 418340
Provider Gender: Female
License Number: NP95009180
NPI: 1649757741
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
LU, TAMMY
Provider ID: 206354
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email: jaquelinc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
<table>
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<th>Provider Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Cultural Competency</th>
<th>Board Certified Specialty</th>
<th>Provider Language(s)</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Accessibility</th>
<th>Provider Phone</th>
<th>After Hours Phone</th>
<th>Website</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>185267</td>
<td>Female</td>
<td>NP4430</td>
<td>1346437464</td>
<td>Y</td>
<td>N</td>
<td>No</td>
<td>Amharic, Arabic</td>
<td>0\150</td>
<td>N</td>
<td>CONTACT</td>
<td>(619) 312-0347</td>
<td>(619) 312-0347</td>
<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
<td><a href="mailto:aschmaltz@lamaestra.org">aschmaltz@lamaestra.org</a></td>
</tr>
<tr>
<td>418340</td>
<td>Female</td>
<td>NP95000205</td>
<td>1063835692</td>
<td>Y</td>
<td>N</td>
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<td>N</td>
<td>CONTACT</td>
<td>(619) 515-2498</td>
<td>(619) 515-2498</td>
<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
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<tr>
<td>418501</td>
<td>Female</td>
<td>NP4430</td>
<td>1346437464</td>
<td>Y</td>
<td>N</td>
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<td>English</td>
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<td>N</td>
<td>CONTACT</td>
<td>(619) 795-5991</td>
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<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
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D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
ODA, THAGHAR
Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
ODA, THAGHAR
Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
ODA, THAGHAR
Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
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Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
ODA, THAGHAR
Provider ID: 418340
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
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Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
OLVERA, LUISA
Provider ID: 478971
Provider Gender: Female
License Number: NP95001710
NPI: 1598161309
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 401-0404
After Hours Phone: (619) 401-0404
Website: N/A
Email: iselaacho@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

CERTIFIED NURSE PRACTITIONER
OLVERA, LUISA
Provider ID: 478971
Provider Gender: Female
License Number: NP95001710
NPI: 1598161309

D2. 初級保健名錄

- **Provider English Spoken**: Y
- **Provider Language(s)**: Spanish
- **Cultural Competency**: N
- **Hospital Affiliation**: SHARP CHULA VISTA MED CTR
- **Board Certified Specialty**: No
- **133 W MAIN ST STE 100**
  - **EL CAJON, CA 92020**
  - **Phone**: (619) 401-0404
  - **After Hours Phone**: (619) 401-0404
- **Website**: N/A
- **Email**: iselaochoa@borregohealth.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0–999
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: SU-SA 8:00AM-8:00PM

**CERTIFIED NURSE PRACTITIONER**

**REAL, MARIA**

- **Provider ID**: 185267
- **Provider Gender**: Female
- **License Number**: NP17328
- **NPI**: 1548450471
- **Provider English Spoken**: Y
- **Cultural Competency**: N
- **Hospital Affiliation**: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
- **Board Certified Specialty**: No
- **875 EL CAJON BLVD**
  - **EL CAJON, CA 92020**
  - **Phone**: (619) 662-4100
  - **After Hours Phone**: (619) 662-4100
- **Website**: www.syhealth.org
- **Email**: aschmaltz@lamaestra.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0–150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-F 8:00AM-5:30PM
  - **SA 8:30AM-2:00PM**
D2. 初級保健名錄

- **Provider ID**: 185267
  - **Provider Gender**: Female
  - **License Number**: NP95002766
  - **NPI**: 1083081467
  - **Provider English Spoken**: Y
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER
  - **Provider ID**: 185267
  - **Provider Gender**: Female
  - **License Number**: NP95002766
  - **NPI**: 1083081467
  - **Provider English Spoken**: Y
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**

- **Provider ID**: 185267
- **Provider Gender**: Female
- **License Number**: NP95002766
- **NPI**: 1083081467
- **Provider English Spoken**: Y
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
  - **Provider ID**: 185267
  - **Provider Gender**: Female
  - **License Number**: NP95002766
  - **NPI**: 1083081467
  - **Provider English Spoken**: Y
  - **American Sign Language (ASL)**: N
  - **Accessibility**: CONTACT PROVIDER

**SMITH, SHARON**

- **Provider ID**: 418340
- **Provider Gender**: Female
- **License Number**: RN428876
- **NPI**: 1780603597
- **Provider English Spoken**: Y
- **Provider Language(s) Spoken**: Spanish
- **Cultural Competency**: N
- **Accessibility**: CONTACT PROVIDER
  - **Provider ID**: 418340
  - **Provider Gender**: Female
  - **License Number**: RN428876
  - **NPI**: 1780603597
  - **Provider English Spoken**: Y
  - **Provider Language(s) Spoken**: Spanish
  - **Cultural Competency**: N
  - **Accessibility**: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**REID, EMILY**

- **Provider ID**: 185267
- **Provider Gender**: Female
- **License Number**: NP95002766
- **NPI**: 1083081467
- **Provider English Spoken**: Y
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**SMITH, SHARON**

- **Provider ID**: 418340
- **Provider Gender**: Female
- **License Number**: RN428876
- **NPI**: 1780603597
- **Provider English Spoken**: Y
- **Provider Language(s) Spoken**: Spanish
- **Cultural Competency**: N
- **Accessibility**: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**SMITH, SHARON**

- **Provider ID**: 418340
- **Provider Gender**: Female
- **License Number**: RN428876
- **NPI**: 1780603597
- **Provider English Spoken**: Y
- **Provider Language(s) Spoken**: Spanish
- **Cultural Competency**: N
- **Accessibility**: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**SMITH, SHARON**

- **Provider ID**: 418340
- **Provider Gender**: Female
- **License Number**: RN428876
- **NPI**: 1780603597
- **Provider English Spoken**: Y
- **Provider Language(s) Spoken**: Spanish
- **Cultural Competency**: N
- **Accessibility**: CONTACT PROVIDER
### CERTIFIED NURSE PRACTITIONER

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<td>NP15444</td>
<td>1780603597</td>
<td>Y</td>
<td>Spanish</td>
<td>N</td>
<td>N</td>
<td>No</td>
<td>525 E MAIN ST</td>
<td>(619) 515-2498</td>
<td>(619) 515-2498</td>
<td><a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
<td><a href="mailto:janellek@fhcsd.org">janellek@fhcsd.org</a></td>
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<td>VERDUZCO GONZALEZ, AURORA</td>
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<td>NP95001961</td>
<td>1932452323</td>
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<td>165 S 1ST ST</td>
<td>(619) 312-0347</td>
<td>(619) 312-0347</td>
<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
<td><a href="mailto:aschmaltz@lamaestra.org">aschmaltz@lamaestra.org</a></td>
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<tr>
<td>VILLANUEVA DE GUTIE, BERENICE</td>
<td>185267</td>
<td>Female</td>
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<td>1952795536</td>
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<td>Spanish</td>
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<td>No</td>
<td>165 S 1ST ST</td>
<td>(619) 312-0347</td>
<td>(619) 312-0347</td>
<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
<td><a href="mailto:aschmaltz@lamaestra.org">aschmaltz@lamaestra.org</a></td>
<td>Yes</td>
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D2. 初級保健名錄

WILLIAMS, BREAHNA
Provider ID: 185267
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

WILLIAMS, BREAHNA
Provider ID: 185267
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

WILLIAMS, TAKISHA
Provider ID: 418340
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
CERTIFIED NURSE PRACTITIONER
WILLIAMS, TAKISHA
Provider ID: 418340
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcscd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE
CORRY, ANDREA
Provider ID: 418340
Provider Gender: Female
License Number: NM1721
NPI: 1255489571
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcscd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
SOSA, DAVID
Provider ID: 206354
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcscd.org
Email: jaquelinc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
SOSA, DAVID
Provider ID: 418340
Provider Gender: Female
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1111 W CHASE AVE
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After Hours Phone: (619) 515-2499
Website: www.fhcscd.org
Email: jaquelinc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Provider Gender: Male
License Number: DC33150
NPI: 1013308675
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 525 E MAIN ST
  EL CAJON, CA 92020
- Phone: (619) 515-2498
  After Hours Phone: (619) 515-2498
- Website: www.fhcsd.org
  Email: janellek@fhcsd.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

CHIROPRACTOR
UY, ASHLEY
Provider ID: 418340
Provider Gender: Female
License Number: DC33869
NPI: 1174059760
- Provider English Spoken: Y
  Provider Language(s) Spoken: Chinese
- Cultural Competency: N
- Board Certified Specialty: No
- 525 E MAIN ST
  EL CAJON, CA 92020
- Phone: (619) 515-2498
  After Hours Phone: (619) 515-2498
- Website: www.fhcsd.org
  Email: janellek@fhcsd.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

CHIROPRACTOR
SOSA, DAVID
Provider ID: 418340
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
- Provider English Spoken: Y
  Cultural Competency: N
- Board Certified Specialty: No
- 525 E MAIN ST
  EL CAJON, CA 92020
- Phone: (619) 515-2498
  After Hours Phone: (619) 515-2498
- Website: www.fhcsd.org
  Email: janellek@fhcsd.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY
METABOLISM DIABETES
NAGELBERG, JODI
Provider ID: 418340
Provider Gender: Female
License Number: A146838
NPI: 1720474141
- Provider English Spoken: Y
  Cultural Competency: N
- Board Certified Specialty: No
- 525 E MAIN ST
  EL CAJON, CA 92020
- Phone: (619) 515-2498
  After Hours Phone: (619) 515-2498
- Website: www.fhcsd.org
  Email: janellek@fhcsd.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

Website: www.fhcsd.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N

ENDOCRINOLOGY
METABOLISM DIABETES
NAGELBERG, JODI
Provider ID: 418340
Provider Gender: Female
License Number: A146838
NPI: 1720474141
- 525 E MAIN ST
  EL CAJON, CA 92020
- Phone: (619) 515-2498
  After Hours Phone: (619) 515-2498
- Website: www.fhcsd.org
  Email: janellek@fhcsd.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

- Provider English Spoken: Y
  Cultural Competency: N
  Board Certified Specialty: No
  525 E MAIN ST
  EL CAJON, CA 92020
  Phone: (619) 515-2498
  After Hours Phone: (619) 515-2498
  Website: www.fhcsd.org
  Email: janellek@fhcsd.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
AL ANI, NAJWAN
Provider ID: 418340
Provider Gender: Female
License Number: A144974
NPI: 1275948473
- Provider English Spoken: Y
  Provider Language(s) Spoken: Arabic
  Cultural Competency: N
  Board Certified Specialty: No
  525 E MAIN ST
  EL CAJON, CA 92020
  Phone: (619) 515-2498
  After Hours Phone: (619) 515-2498
  Website: www.fhcsd.org
  Email: janellek@fhcsd.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
ALGHAMDI, ASMA
Provider ID: 569910
Provider Gender: Female
License Number: A167529
NPI: 1316310840
- Provider English Spoken: Y
  Cultural Competency: N
  Board Certified Specialty: No
  875 EL CAJON BLVD
  EL CAJON, CA 92020
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: www.syhealth.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
BRUHN, JOSHUA
Provider ID: 418340
Provider Gender: Male
License Number: A186694
NPI: 1447888284
- Provider English Spoken: Y
  Cultural Competency: N
  Board Certified Specialty: No
  525 E MAIN ST
  EL CAJON, CA 92020
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: www.syhealth.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
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D2. 初級保健名錄

EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

FAMILY PRACTICE
BRUHN, JOSHUA
Provider ID: 418340
Provider Gender: Male
License Number: A186694
NPI: 1447888284
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
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Phone: (619) 515-2498
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DOMINGUEZ, DENNIS
Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DOMINGUEZ, DENNIS
Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
DOMINGUEZ, DENNIS
Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
DOMINGUEZ, DENNIS
Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
DOMINGUEZ, DENNIS
Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
DOMINGUEZ, DENNIS
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Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
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Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
DOMINGUEZ, DENNIS
Provider ID: 569910
Provider Gender: Male
License Number: G43179
NPI: 1225063811
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
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<th>Provider ID</th>
<th>Provider Gender</th>
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<th>Cultural Competency:</th>
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<th>Medi-Cal Open Panel:</th>
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<tr>
<td>478971</td>
<td>Male</td>
<td>A98486</td>
<td>1053417691</td>
<td>Y</td>
<td>Farsi, Spanish</td>
<td>0\150</td>
<td>N</td>
<td>N</td>
<td>No</td>
<td>(619) 401-0404</td>
<td>(619) 515-2498</td>
<td><a href="http://www.syhealth.org">www.syhealth.org</a></td>
<td><a href="mailto:iselaacho@borregohealth.org">iselaacho@borregohealth.org</a></td>
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<tr>
<td>418340</td>
<td>Male</td>
<td>A83390</td>
<td>1477711521</td>
<td>Y</td>
<td>Farsi, Spanish</td>
<td>0\150</td>
<td>N</td>
<td>N</td>
<td>No</td>
<td>(619) 401-0404</td>
<td>(619) 515-2498</td>
<td><a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
<td>janellekovhcsd.org</td>
<td>Yes</td>
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<tr>
<td>206354</td>
<td>Male</td>
<td></td>
<td></td>
<td>Y</td>
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<td>CONTACT PROVIDER</td>
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D2. 初級保健名錄

Provider Gender: Female
License Number: A110192
NPI: 1861648461
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No

1111 W CHASE AVE
EL CAJON, CA 92020
- Phone: (619) 515-2499
- After Hours Phone: (619) 515-2499
- Website: www.fhcsd.org
- Email: jaquelinc@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

HODGKIN, EDWARD
Provider ID: 418340
Provider Gender: Male
License Number: A177445
NPI: 1922619766
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
- Phone: (619) 515-2498
- After Hours Phone: (619) 515-2498
- Website: www.fhcsd.org
- Email: janellek@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE

KASAWA, JOHN
Provider ID: 569910
Provider Gender: Male
License Number: A79338
NPI: 1134230329
- Provider English Spoken: Y
- Provider Language(s): Arabic, Spanish
- Cultural Competency: N
- Board Certified Specialty: No

875 EL CAJON BLVD
EL CAJON, CA 92020
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KASAWA, JOHN
Provider ID: 569910
Provider Gender: Male
License Number: A79338
NPI: 1134230329
- Provider English Spoken: Y

Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KASAWA, JOHN
Provider ID: 569910
Provider Gender: Male
License Number: A79338
NPI: 1134230329
- Provider English Spoken: Y

Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

- Provider Language(s)
  Spoken: Arabic, Spanish
  Cultural Competency: N
  Board Certified Specialty: No
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: www.syhealth.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
LIN, SHUANG
Provider ID: 206354
Provider Gender: Female
License Number: A138887
NPI: 1689093684
Provider English Spoken: Y
Provider Language(s)
Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email: jaquelinc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
NASSIR, BASSAM
Provider ID: 569910
Provider Gender: Male
License Number: A101888
NPI: 1386848166
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
PUTRUS, RAMIZ
Provider ID: 185267
Provider Gender: Male
License Number: A68184
NPI: 1144300534
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

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

165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**

**RONQUILLO, KAREN AN**
Provider ID: 658684
Provider Gender: Female
NPI: 1275160012
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (858) 633-4692
After Hours Phone: (619) 440-2751
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

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

**FAMILY PRACTICE**

**SALEM, RAMSEY**
Provider ID: 569910
Provider Gender: Male
License Number: A158364
NPI: 1245401298
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

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

**FAMILY PRACTICE**

**SCHUMAKER, EDWARD**
Provider ID: 418501
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619)
D2. 初級保健名錄

795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Availability: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
SCHUMAKER, EDWARD
Provider ID: 418501
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Board Certified Specialty: No
FQHC
CENTRO MEDICO EL CAJON,
Provider ID: 478971
NPI: 1154480069
Provider English Spoken: Y
Cultural Competency: N
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 312-0347
After Hours Phone: (619) 873-8940
Fax: (619) 401-0522
Website: N/A
Email: iselaechoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

FQHC
CENTRO MEDICO EL CAJON,
Provider ID: 478971
NPI: 1154480069
Provider English Spoken: Y
Cultural Competency: N
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 312-0347
After Hours Phone: (619) 873-8940
Fax: (619) 401-0522
Website: N/A
Email: iselaechoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

FQHC
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Provider ID: 478971
NPI: 1154480069
Provider English Spoken: Y
Cultural Competency: N
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 312-0347
After Hours Phone: (619) 873-8940
Fax: (619) 401-0522
Website: N/A
Email: iselaechoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

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133 W MAIN ST STE 100
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Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
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Fax: (619) 401-0522
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

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Email: iselaechoa@borregohealth.org
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Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

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Email: iselaechoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

FQHC
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Provider ID: 478971
NPI: 1154480069
Provider English Spoken: Y
Cultural Competency: N
133 W MAIN ST STE 100
EL CAJON, CA 92020
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After Hours Phone: (619) 873-8940
Fax: (619) 401-0522
Website: N/A
Email: iselaechoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

FQHC
CENTRO MEDICO EL CAJON,
D2. 初級保健名錄

873-8940
Website: N/A
Email: iselaaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

FQHC
CHASE AVENUE FAMILY
HEALTH CTRS INC,
Provider ID: 206354
NPI: 1104861681
Provider English Spoken: Y
Cultural Competency: N
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
Fax: (619) 593-7164
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email: jaquelinc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
FAMILY HLTH CTR SAN DIEGO-EL CAJON,
Provider ID: 418340
NPI: 1932561198
Provider English Spoken: Y
Cultural Competency: N
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
Fax: (619) 269-0191
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
LA MAESTRA CHC EL CAJON BROADWAY,
Provider ID: 418501
NPI: 1134590086
Provider English Spoken: Y
Cultural Competency: N
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
Fax: (619) 795-5992
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

**FQHC**

**LA MAESTRA CHC EL CAJON BROADWAY,**
Provider ID: 418501  
NPI: 1134590086  
Provider English Spoken: Y  
Cultural Competency: N  
1032 BROADWAY  
EL CAJON, CA 92021  
Phone: (619) 795-5991  
Fax: (619) 795-5992  
After Hours Phone: (619) 795-5991  
Website: www.lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:30PM

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**
Provider ID: 185267  
NPI: 1336353721  
Provider English Spoken: Y  
Cultural Competency: N  
165 S 1ST ST  
EL CAJON, CA 92019  
Phone: (619) 312-0347  
Fax: (619) 749-5480  
After Hours Phone: (619) 312-0347  
Website: www.lamaestra.org  
Email: aschmaltz@lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

**FQHC**

**LA MAESTRA FAMILY CLINIC INC,**
Provider ID: 185267  
NPI: 1336353721  
Provider English Spoken: Y  
Cultural Competency: N  
165 S 1ST ST  
EL CAJON, CA 92019  
Phone: (619) 312-0347  
Fax: (619) 749-5480  
After Hours Phone: (619) 312-0347  
Website: www.lamaestra.org  
Email: aschmaltz@lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

**FQHC**

**SAN YSIDRO HEALTH EL CAJON,**
Provider ID: 569910  
NPI: 1568845741  
Provider English Spoken: Y  
Cultural Competency: N  
875 EL CAJON BLVD  
EL CAJON, CA 92020  
Phone: (619) 662-4100  
Fax: (619) 785-3356  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

**HEPATOLOGY**

**GISH, ROBERT**
Provider ID: 185267  
Provider Gender: Male
D2. 初級保健名錄

License Number: G45632
NPI: 1548281322
.streaming
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY COMM MED CTR
Board Certified Specialty: No
.streaming
Medi-Cal Open Panel: Yes
.streaming
Min/Max Age: 0\150
American Sign Language (ASL): N
.streaming
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

**HEPATOLOGY**

**GISH, ROBERT**

Provider ID: 185267
Provider Gender: Male
License Number: G45632
NPI: 1548281322
.streaming
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY COMM MED CTR
Board Certified Specialty: No
.streaming
Medi-Cal Open Panel: Yes
.streaming
Min/Max Age: 0\150
American Sign Language (ASL): N
.streaming
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

**INTERNAL MEDICINE**

**AL-TAMEEMI, AHMED**

Provider ID: 478971
Provider Gender: Male
License Number: A151547
NPI: 1134513211
.streaming
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
.streaming
133 W MAIN ST STE 100
EL CAJON, CA 92020
.streaming
Phone: (619) 401-0404
.streaming
After Hours Phone: (619) 401-0404
.streaming
Website: N/A
.streaming
Email: iselaochoa@borregohealth.org
.streaming
Medi-Cal Open Panel: Yes
.streaming
Min/Max Age: 0\999
American Sign Language (ASL): N
.streaming
Accessibility: CONTACT PROVIDER

**INTERNAL MEDICINE**

**AWDISHO, ALAN**

Provider ID: 569910
Provider Gender: Male
License Number: 20A18702
NPI: 1164795498
.streaming
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
.streaming
875 EL CAJON BLVD
EL CAJON, CA 92020
.streaming
Phone: (619) 662-4100
D2. 初級保健名錄

- **Awdisho, Alan**
  - Provider ID: 569910
  - Provider Gender: Male
  - License Number: 20A18702
  - NPI: 1164795498
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: N/A
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
  - Board Certified Specialty: No
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- **Carpenter, Robert**
  - Provider ID: 569910
  - Provider Gender: Male
  - License Number: 20A10964
  - NPI: 1356343040
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
  - Board Certified Specialty: No
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- **Duong, Mai**
  - Provider ID: 418340
  - Provider Gender: Female
  - License Number: A127798
  - NPI: 1629339304
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Vietnamese
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
  - Board Certified Specialty: No
  - 525 E MAIN ST
    - EL CAJON, CA 92020
  - Phone: (619) 515-2498
  - After Hours Phone: (619) 515-2498
  - Website: www.fhcsd.org
  - Email: janellek@fhcsd.org

- **INTERNAL MEDICINE**

- **Awdisho, Alan**
  - Provider ID: 569910
  - Provider Gender: Male
  - License Number: 20A18702
  - NPI: 1164795498
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: N/A
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
  - Board Certified Specialty: No
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- **Carpenter, Robert**
  - Provider ID: 569910
  - Provider Gender: Male
  - License Number: 20A10964
  - NPI: 1356343040
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Vietnamese
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- **Duong, Mai**
  - Provider ID: 418340
  - Provider Gender: Female
  - License Number: A127798
  - NPI: 1629339304
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Vietnamese
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
  - Board Certified Specialty: No
  - 525 E MAIN ST
    - EL CAJON, CA 92020
  - Phone: (619) 515-2498
  - After Hours Phone: (619) 515-2498
  - Website: www.fhcsd.org

- **INTERNAL MEDICINE**

- **Duong, Mai**
  - Provider ID: 418340
  - Provider Gender: Female
  - License Number: A127798
  - NPI: 1629339304
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Vietnamese
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
  - Board Certified Specialty: No
  - 525 E MAIN ST
    - EL CAJON, CA 92020
  - Phone: (619) 515-2498
  - After Hours Phone: (619) 515-2498
  - Website: www.fhcsd.org
<table>
<thead>
<tr>
<th>Location</th>
<th>Provider Name</th>
<th>Provider ID</th>
<th>Provider Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>Provider Language(s) Spoken</th>
<th>Board Certified Specialty</th>
<th>Hospital Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td>EL CAJON, CA 92020</td>
<td>GORGES, RANDA</td>
<td>418340</td>
<td>Female</td>
<td>A138815</td>
<td>1285079509</td>
<td>Arabic</td>
<td>No</td>
<td>ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</td>
</tr>
<tr>
<td>EL CAJON, CA 92021</td>
<td>JABRI, ZAIN</td>
<td>418501</td>
<td>Male</td>
<td>A160760</td>
<td>1891159620</td>
<td>Arabic</td>
<td>No</td>
<td>ST AGNES MEDICAL CENTER, CITY OF HOPE NATIONAL MED CTR, JOHN F KENNEDY MEMORIAL HOSP, SUTTER MEDICAL CENTER SACRAMENTO, PIONEERS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</td>
</tr>
</tbody>
</table>

**Contact Information**

**INTERNAL MEDICINE**

**GORGES, RANDA**
- Provider ID: 418340
- Provider Gender: Female
- License Number: A138815
- NPI: 1285079509
- Provider English Spoken: Yes
- Provider Language(s) Spoken: Arabic
- Board Certified Specialty: No
- Min/Max Age: 0\150
- American Sign Language (ASL): No
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:30AM-5:30PM

**JABRI, ZAIN**
- Provider ID: 418501
- Provider Gender: Male
- License Number: A160760
- NPI: 1891159620
- Provider English Spoken: Yes
- Provider Language(s) Spoken: Arabic
- Board Certified Specialty: No
- Min/Max Age: 0\150
- American Sign Language (ASL): No
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:30AM-5:30PM

**CHULA VISTA**
- Board Certified Specialty: No
- Address: 1032 BROADWAY
- Phone: (619) 795-5991
- After Hours Phone: (619) 795-5991
- Website: www.lamaestra.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): No
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE
MANSY, TAMARA
Provider ID: 569910
Provider Gender: Female
License Number: A164238
NPI: 1396277737
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
MAY, LOUIS
Provider ID: 569910
Provider Gender: Male
License Number: A138568
NPI: 1720497514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
MICHAEL, RAMI
Provider ID: 569910
Provider Gender: Male
License Number: A144513
NPI: 1467871673
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
D2. 初級保健名錄

 INTERNAL MEDICINE
MICHAEL, RAMI
Provider ID: 569910
Provider Gender: Male
License Number: A144513
NPI: 1467871673
¬ Provider English Spoken: Y
¬ Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

 INTERNAL MEDICINE
NADI, FAHIMA
Provider ID: 418340
Provider Gender: Female
License Number: A175325
NPI: 1770072290
¬ Provider English Spoken: Y
¬ Provider Language(s) Spoken: Pushto
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

 INTERNAL MEDICINE
NARAYAN, ARCHANA
Provider ID: 569910
Provider Gender: Female
License Number: A101773
NPI: 1003053950
¬ Provider English Spoken: Y
¬ Provider Language(s) Spoken: Hindi, Kannada
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

 INTERNAL MEDICINE
NARAYAN, ARCHANA
Provider ID: 569910
Provider Gender: Female
License Number: A101773
NPI: 1003053950
¬ Provider English Spoken: Y
¬ Provider Language(s) Spoken: Hindi, Kannada
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

- **Provider Language(s)**
  - Spoken: Hindi, Kannada
  - Cultural Competency: N
- **Hospital Affiliation**: PALOMAR MEDICAL CENTER
- **Board Certified Specialty**: No
- **Phone**: (619) 662-4100
  - **After Hours Phone**: (619) 662-4100
- **Website**: www.syhealth.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-F 8:00AM-5:00PM

**INTERNAL MEDICINE**

**PARIKH, MILIND**
- **Provider ID**: 418340
- **Provider Gender**: Male
- **License Number**: 20A13745
- **NPI**: 1194161406
- **Provider English Spoken**: Y
  - **Provider Language(s)**
    - Spoken: Gujarati, Hindi, Spanish
- **Cultural Competency**: N
- **Hospital Affiliation**: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout
- **Board Certified Specialty**: No
- **Address**: 525 E MAIN ST
  - **City**: EL CAJON
  - **State**: CA
  - **Zip**: 92020
- **Phone**: (619) 515-2498
  - **After Hours Phone**: (619) 515-2498
- **Website**: www.fhcsd.org
- **Email**: janellek@fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\999
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**INTERNAL MEDICINE**

**PETITT, JOHN**
- **Provider ID**: 478971
- **Provider Gender**: Male
- **License Number**: G52812
- **NPI**: 1497992432
- **Provider English Spoken**: Y
  - **Provider Language(s)**
    - Spoken: Spanish
- **Cultural Competency**: N
- **Board Certified Specialty**: No
- **Address**: 133 W MAIN ST
  - **City**: EL CAJON
  - **State**: CA
  - **Zip**: 92020
- **Phone**: (619) 401-0404
  - **After Hours Phone**: (619) 401-0404
- **Website**: iselaacho@borregohealth.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**INTERNAL MEDICINE**

**PETITT, JOHN**
- **Provider ID**: 478971
- **Provider Gender**: Male
- **License Number**: G52812
- **NPI**: 1497992432
- **Provider English Spoken**: Y
  - **Provider Language(s)**
    - Spoken: Spanish
- **Cultural Competency**: N
- **Board Certified Specialty**: No
- **Address**: 133 W MAIN ST
  - **City**: EL CAJON
  - **State**: CA
  - **Zip**: 92020
- **Phone**: (619) 401-0404
  - **After Hours Phone**: (619) 401-0404
- **Website**: N/A
- **Email**: iselaacho@borregohealth.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\999
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
REDDY, ARJUN
Provider ID: 428134
Provider Gender: Male
NPI: 1730132457
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL
 Board Certified Specialty: No
 860 JAMACHA RD STE 107
 EL CAJON, CA 92019
 Phone: (619) 456-9920
 Fax: (619) 456-9340
 After Hours Phone: (619) 456-9920
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-7:00PM

INTERNAL MEDICINE
ROUEL, WADI
Provider ID: 185267
Provider Gender: Male
License Number: C55979
NPI: 1740254713
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish, Syriac
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 269-1262
 After Hours Phone: (619) 269-1262
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org

INTERNAL MEDICINE
ROUEL, LINDA
Provider ID: 308485
Provider Gender: Female
NPI: 1326128950
 Provider English Spoken: Y
 Provider Language(s)
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 5442 SYCUAN RD
 EL CAJON, CA 92019
 Phone: (619) 445-0707
 Fax: (619) 445-0988
 After Hours Phone: (619) 445-0707
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:00AM-5:00PM
 TH-F 8:00AM-5:00PM

INTERNAL MEDICINE
ROUEL, WADI
Provider ID: 185267
Provider Gender: Male
License Number: C55979
NPI: 1740254713
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic, Spanish, Syriac
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
 Board Certified Specialty: No
 165 S 1ST ST
 EL CAJON, CA 92019
 Phone: (619) 269-1262
 After Hours Phone: (619) 269-1262
 Website: www.lamaestra.org
 Email:
### INTERNAL MEDICINE

**ROUEL, WADI**  
Provider ID: 418501  
Provider Gender: Male  
License Number: C55979  
NPI: 1740254713

- Provider English Spoken: Y  
- Provider Language(s): Spoken: Arabic, Spanish, Syriac  
- Cultural Competency: N  
- Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL  
- Board Certified Specialty: No  
- 1032 BROADWAY  
  EL CAJON, CA 92021  
  📞 Phone: (619) 795-5983  
  📞 After Hours Phone: (619) 795-5983  
  🌐 Website: www.lamaestra.org  
  Medi-Cal Open Panel: Yes  
  Min/Max Age: 0\150  
  American Sign Language (ASL): N  
  🌐 Accessibility: CONTACT PROVIDER  
  Hours: M-F 8:30AM-5:30PM

**SHEIKH-MOHAMED, HALA**  
Provider ID: 569910  
Provider Gender: Female  
License Number: A159247  
NPI: 1972946770

- Provider English Spoken: Y  
- Provider Language(s): Spoken: Arabic, Hindi, Urdu  
- Cultural Competency: N  
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL  
- Board Certified Specialty: No  
- 875 EL CAJON BLVD  
  EL CAJON, CA 92020  
  📞 Phone: (619) 662-4100  
  📞 After Hours Phone: (619) 662-4100  
  🌐 Website: www.syhealth.org  
  Medi-Cal Open Panel: Yes  
  Min/Max Age: 0\150  
  American Sign Language (ASL): N  
  🌐 Accessibility: CONTACT PROVIDER  
  Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

INTERNAL MEDICINE
TCHAKMAKJIAN, LEVON
Provider ID: 569910
Provider Gender: Male
License Number: C144411
NPI: 1790744795
Provider English Spoken: Y
Provider Language(s):
   Spoken: Armenian, Hebrew
Cultural Competency: N
Hospital Affiliation: NORTH BAY VACAVALLEY HOSPITAL
Board Certified Specialty: No

INTERNATIONAL MEDICINE
ZAYED, AHMAD
Provider ID: 478971
Provider Gender: Male
License Number: A169713
NPI: 1720500929
Provider English Spoken: Y
Provider Language(s):
   Spoken: Arabic, Chinese, Mandarin, Persian, Tagalog
Cultural Competency: N
Hospital Affiliation: RIVERSIDE COMMUNITY HOSPITAL
Board Certified Specialty: No

INTERVENTIONAL CARDIOLOGY
KAFRI, HASSAN
Provider ID: 569910
Provider Gender: Male
License Number: A96002
NPI: 1730258401
Provider English Spoken: Y
Provider Language(s):
   Spoken: Arabic, German,
Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERVENTIONAL CARDIOLOGY
KAFRI, HASSAN
Provider ID: 569910
Provider Gender: Male
License Number: A96002
NPI: 1730258401

Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, German, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERVENTIONAL CARDIOLOGY
MOUSSAVIAN, MEHRAN
Provider ID: 418340
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRICITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNATIONAL PCP

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Website: www fhcsd org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ALIMONOS, LYSISTRATI
Provider ID: 418340
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www fhcsd org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
BUECHNER, CHARLENE
Provider ID: 418340
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www fhcsd org
Email: janellek@fhcsd.org
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BULLOCH, EDGAR
Provider ID: 478971
Provider Gender: Male
License Number: A113241
NPI: 1508046376
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 873-8940
After Hours Phone: (619) 873-8940
Website: N/A
Email:
iselaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 418340
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1105
D2. 初級保健名錄

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

**OBSTETRICS / GYNECOLOGY**
**CERVANTES, SANDRA**
Provider ID: 418340
Provider Gender: Female
License Number: A118095
NPI: 1073701041
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
- 525 E MAIN ST
  EL CAJON, CA 92020
- Phone: (619) 515-2498
- After Hours Phone: (619) 515-2498
- Website: www.fhcsd.org
  Email: janellek@fhcsd.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-F 8:30AM-5:30PM

**OBSTETRICS / GYNECOLOGY**
**CHAKRABARTI, PRIYA**
Provider ID: 418340
Provider Gender: Female
License Number: A163464
NPI: 1326531401
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
- 525 E MAIN ST
  EL CAJON, CA 92020
- Phone: (619) 515-2498
- After Hours Phone: (619) 515-2498
- Website: www.fhcsd.org
  Email: janellek@fhcsd.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-F 8:30AM-5:30PM

**OBSTETRICS / GYNECOLOGY**
**CERVANTES, SANDRA**
Provider ID: 418340
Provider Gender: Female
License Number: A118095
NPI: 1073701041
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
- 525 E MAIN ST
  EL CAJON, CA 92020
- Phone: (619) 515-2498
- After Hours Phone: (619) 515-2498
- Website: www.fhcsd.org
  Email: janellek@fhcsd.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-F 8:30AM-5:30PM

525 E MAIN ST
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Phone: (619) 515-2498
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Website: www.fhcsd.org
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

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

OBSTETRICS / GYNECOLOGY
DE MIK, TRAVIS
Provider ID: 418340
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DORUELO, ASHLEY
Provider ID: 418340
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DE MIK, TRAVIS
Provider ID: 418340
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
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Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
HANLEY, LAUREN
Provider ID: 418340
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
OBSTETRICS / GYNECOLOGY

HANLEY, LAUREN
Provider ID: 418340
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 873-8940
After Hours Phone: (619) 873-8940
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

KHAN, ALIYA
Provider ID: 418501
Provider Gender: Female
License Number: G50634
NPI: 1285687350
Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified Specialty: No
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Email: iselaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

HO, MYLIEN
Provider ID: 478971
Provider Gender: Female
License Number: A48215
NPI: 1851464606
Provider English Spoken: Y
Provider Language(s)
Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified Specialty: No
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 873-8940
After Hours Phone: (619) 873-8940
Website: iselaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Your PCP’s doctor group may have its own network mental health service providers. Please refer to the list below. You may contact these providers directly. Please note, some services may require prior authorization from the mental health service provider before being covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
D2. 初級保健名錄

Provider Gender: Female
License Number: G50634
NPI: 1285687350
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified Specialty: No

1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY
LIPSCHITZ, LISA
Provider ID: 418340
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND
HEALTHCARE CTR, SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
LOEFFLER, ALLISON
Provider ID: 418340
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:00AM-2:00PM

OBSTETRICS / GYNECOLOGY
LOEFFLER, ALLISON
Provider ID: 418340
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:00AM-2:00PM

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
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<th>Name</th>
<th>ID</th>
<th>Gender</th>
<th>License</th>
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<th>Panel</th>
<th>Hours</th>
<th>Accessibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>MELENDEZ BERRIOS, IARA DEL</td>
<td>418340</td>
<td>Female</td>
<td>A114181</td>
<td>1740514249</td>
<td>Y</td>
<td>Spanish</td>
<td>N</td>
<td>SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</td>
<td>OBSTETRICS / GYNECOLOGY</td>
<td>525 E MAIN ST EL CAJON, CA 92020</td>
<td>(619) 515-2498</td>
<td>(619) 515-2498</td>
<td></td>
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</tr>
<tr>
<td>MENDEZ, DIEGO</td>
<td>569910</td>
<td>Male</td>
<td>A47906</td>
<td>1437181922</td>
<td>Y</td>
<td>Spanish</td>
<td>N</td>
<td>MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL, BAKERSFIELD MEMORIAL HOSP, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER</td>
<td>OBSTETRICS / GYNECOLOGY</td>
<td>875 EL CAJON BLVD EL CAJON, CA 92020</td>
<td>(619) 662-4100</td>
<td>(619) 662-4100</td>
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<td></td>
</tr>
</tbody>
</table>

**D2. 初級保健名錄**

<table>
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<tr>
<th>Name</th>
<th>ID</th>
<th>Gender</th>
<th>License</th>
<th>NPI</th>
<th>English Spoken</th>
<th>Language(s)</th>
<th>Cultural Competency</th>
<th>Hospital Affiliation</th>
<th>Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Website</th>
<th>Email</th>
<th>Panel</th>
<th>Hours</th>
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</tr>
</tbody>
</table>
D2. 初級保健名錄

Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
MENDEZ, DIEGO
Provider ID: 569910
Provider Gender: Male
License Number: A47906
NPI: 1437181922
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
PAPA, RHETT
Provider ID: 478971
Provider Gender: Male
License Number: 20A11733
NPI: 1063642312
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified Specialty: No
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 873-8940
After Hours Phone: (619) 873-8940
Website: N/A
Email: iselaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
RODRIGUEZ JEREZ, ROBERTO
Provider ID: 418340
Provider Gender: Male
License Number: A154298
NPI: 1710316450
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
PAPA, RHETT
Provider ID: 478971
Provider Gender: Male
License Number: 20A11733
NPI: 1063642312
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified Specialty: No
133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 873-8940
After Hours Phone: (619) 873-8940
Website: N/A

OBSTETRICS / GYNECOLOGY
初級保健名錄

RODRIGUEZ JEREZ, ROBERTO
Provider ID: 418340
Provider Gender: Male
License Number: A154298
NPI: 1710316450
☑ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No

AGEMENT PROVIDER

MERGENCY PROVIDER

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
SAPRA, SONIA
Provider ID: 418340
Provider Gender: Female
License Number: A164859
NPI: 1952751711
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

AGEMENT PROVIDER

MERGENCY PROVIDER

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
STABEN, REBECCA
Provider ID: 418340
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
☑ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No

AGEMENT PROVIDER

MERGENCY PROVIDER

525 E MAIN ST
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Min/Max Age: 0\150
American Sign Language (ASL): N
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OBSTETRICS / GYNECOLOGY
STABEN, REBECCA
Provider ID: 418340
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
☑ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
D2. 初級保健名錄

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

**Min/Max Age: 0\150**

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

Accessibility: CONTACT PROVIDER

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

**OBSTETRICS / GYNECOLOGY**

WINESBURG, JENNIFER
Provider ID: 418340
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

**Min/Max Age: 0\150**

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

Accessibility: CONTACT PROVIDER

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

ZIEG, ALAN
Provider ID: 418340
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

**Min/Max Age: 0\150**

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

Accessibility: CONTACT PROVIDER

**Hours:** M-F 8:00AM-5:00PM

**OBSTETRICS / GYNECOLOGY**

WINESBURG, JENNIFER
Provider ID: 418340
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes

**Min/Max Age: 0\150**

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

Accessibility: CONTACT PROVIDER

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

ZIEG, ALAN
Provider ID: 418340
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
D2. 初級保健名錄

SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY
ALBORZIAN, SHERVIN
Provider ID: 418340
Provider Gender: Male
License Number: A107093
NPI: 1588825129
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

OPHTHALMOLOGY
JARDON, JAVIER
Provider ID: 569910
Provider Gender: Male
License Number: A131365
NPI: 1609171982
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CALIFORNIA HOSP MED CTR LOS ANGELES, EL CENTRO REGIONAL MEDICAL CENTER
Board Certified Specialty: No

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY
JARDON, JAVIER
Provider ID: 569910
Provider Gender: Male
License Number: A131365
NPI: 1609171982
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CALIFORNIA HOSP MED CTR LOS ANGELES, EL CENTRO REGIONAL MEDICAL CENTER
Board Certified Specialty: No

875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619)
D2. 初級保健名錄

662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY
MANI, NASRIN
Provider ID: 569910
Provider Gender: Female
License Number: A40473
NPI: 1023061314
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Faroese, Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OPHTHALMOLOGY
PAPASTERGIOU, GEORGIOS
Provider ID: 569910
Provider Gender: Male
License Number: A127706
NPI: 1790054393
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Farsi, French, Greek, Italian, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

法語

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

OPHTHALMOLOGY
PONS, MAURICIO
Provider ID: 569910
Provider Gender: Male
License Number: A87650
NPI: 1376723759
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

OPHTHALMOLOGY
SKAF, AYHAM
Provider ID: 569910
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
D2. 初級保健名錄

Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDiatrics
ADJAN, ROULA
Provider ID: 185267
Provider Gender: Female
License Number: A81682
NPI: 1992847263
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Board Certified Specialty: No
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDiatrics
CONE, STEPHANIE
Provider ID: 185267
Provider Gender: Female
License Number: A123929
NPI: 1437444858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

**PROVIDER**

**PEDIATRICS**

**CONE, STEPHANIE**
Provider ID: 418501  
Provider Gender: Female  
License Number: A123929  
NPI: 1437444858
- Provider English Spoken: Y  
- Provider Language(s)  
  - Spoken: Spanish  
  - Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, Rady Childrens Hospital San Diego  
Board Certified Specialty: No  
- 1032 BROADWAY  
  - EL CAJON, CA 92021  
  - Phone: (619) 795-5991  
  - After Hours Phone: (619) 795-5991  
- Website: www.lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
  - Hours: M-F 8:30AM-5:30PM

**PEDIATRICS**

**FIGUEROA RODRIGUEZ, BRENDA**
Provider ID: 478971  
Provider Gender: Female  
License Number: A114674  
NPI: 1134205214
- Provider English Spoken: Y  
- Provider Language(s)  
  - Spoken: Spanish  
  - Cultural Competency: N  
Board Certified Specialty: No  
- 133 W MAIN ST STE 100  
  - EL CAJON, CA 92020  
  - Phone: (619) 873-8940  
  - After Hours Phone: (619) 873-8940  
- Website: N/A  
Email: iselaacho@borregohealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**PEDIATRICS**

**FLEMING, TARA**
Provider ID: 418340  
Provider Gender: Female  
License Number: A152462  
NPI: 1972965242
- Provider English Spoken: Y  
- Provider Language(s)  
  - Spoken: Spanish  
  - Cultural Competency: N  
Board Certified Specialty: No  
- 133 W MAIN ST STE 100  
  - EL CAJON, CA 92020  
  - Phone: (619) 873-8940  
  - After Hours Phone: (619) 873-8940  
- Website: N/A  
Email: iselaacho@borregohealth.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
  

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueShieldca.com/fad。
D2. 初級保健全錄

**Board Certified Specialty: No**  
525 E MAIN ST  
EL CAJON, CA 92020  
Phone: (619) 515-2498  
After Hours Phone: (619) 515-2498  
Website: www.fhcsd.org  
Email: janellek@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:30PM  

**PEDIATRICS**  
**HOANG, VY**  
Provider ID: 546310  
Provider Gender: Female  
NPI: 1649575135  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Board Certified Specialty: No  
844 JACKMAN ST  
EL CAJON, CA 92020  
Phone: (619) 442-2560  
Fax: (619) 442-7836  
After Hours Phone: (619) 442-2560  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  

**PEDIATRICS**  
**FLEMING, TARA**  
Provider ID: 418340  
Provider Gender: Female  
License Number: A152462  
NPI: 1972965242  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
525 E MAIN ST  
EL CAJON, CA 92020  
Phone: (619) 515-2498  
After Hours Phone: (619) 515-2498  
Website: www.fhcsd.org  
Email: janellek@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:30PM  

**PEDIATRICS**  
**JACKSON, DANA**  
Provider ID: 418340  
Provider Gender: Female  
License Number: 20A14119  
NPI: 1689060063  
 Provider English Spoken: Y  
Provider Language(s)  
Spoken: Portuguese, Spanish  
Cultural Competency: N  
Hospital Affiliation:  
MARINHEALTH AND  
MARINHEALTH MEDICAL  
CENTER, SCRIPPS MERCY  
HOSPITAL  
Board Certified Specialty: No  
525 E MAIN ST  
EL CAJON, CA 92020  
Phone: (619) 515-2498  
After Hours Phone: (619) 515-2498  
Website: www.fhcsd.org  
Email: janellek@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
KODSI, ALICIA
Provider ID: 418340
Provider Gender: Female
License Number: A147976
NPI: 1932514353
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS
NAGNUR, PRITI
Provider ID: 206354
Provider Gender: Female
License Number: A170055
NPI: 1316289929
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Kannada
Cultural Competency: N
Board Certified Specialty: No
1111 W CHASE AVE
EL CAJON, CA 92020
Phone: (619) 515-2499
After Hours Phone: (619) 515-2499
Website: www.fhcsd.org
Email: jaquelinc@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
NAIK, SHILPA
Provider ID: 546498
Provider Gender: Female
NPI: 1902156904
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL
Board Certified Specialty: No
844 JACKMAN ST
D2. 初級保健名錄

EL CAJON, CA 92020
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619) 442-2560
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
NGUYEN, VI
Provider ID: 546509
Provider Gender: Female
NPI: 1053540534
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RACY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
844 JACKMAN ST
EL CAJON, CA 92020
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619) 442-2560
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
PINTO, ANITA
Provider ID: 546215
Provider Gender: Female
NPI: 1477663722
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORN, RACY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
844 JACKMAN ST
EL CAJON, CA 92020
Phone: (619) 442-2560
Fax: (619) 442-7836
After Hours Phone: (619) 442-2560
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
RODRIGUEZ, ALDO
Provider ID: 569910
Provider Gender: Male
License Number: A134995
NPI: 1508209651
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
RODRIGUEZ, ALDO
Provider ID: 569910
Provider Gender: Male
License Number: A134995
NPI: 1508209651
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

N
Accessible: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
ALYAS, ALISIA
Provider ID: 418501
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
- Provider English Spoken: Y
  Cultural Competency: N
  Board Certified Specialty: No
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT
ALYAS, ALISIA
Provider ID: 185267
Provider Gender: Female
License Number: PA58466
NPI: 1437768017
- Provider English Spoken: Y
  Cultural Competency: N
  Board Certified Specialty: No
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
ARMENTA, JORGE
Provider ID: 185267
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
- Provider English Spoken: Y
  Cultural Competency: N
  Board Certified Specialty: No
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

D2. 初級保健名錄

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM
 SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT
ARMENTA, JORGE
Provider ID: 185267
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT
MERCER, KELLY
Provider ID: 185267
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
165 S 1ST ST
EL CAJON, CA 92019
Phone: (619) 312-0347
After Hours Phone: (619) 312-0347
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PHYSICIANS ASSISTANT
MERCER, KELLY
Provider ID: 418501
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

- Provider Language(s)
  - Spoken: Arabic
  - Cultural Competency: N

Board Certified Specialty: No

1032 BROADWAY
EL CAJON, CA 92021
Phone: (619) 795-5991
After Hours Phone: (619) 795-5991
Website: www.lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
ROSENBLATT, SHERI
Provider ID: 569910
Provider Gender: Female
License Number: PA22872
NPI: 1114041621
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
TURNER, SHEREENA
Provider ID: 418340
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
Provider English Spoken: Y
Provider Language(s)
  - Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT
ZAMBRANA, GEORGE
Provider ID: 478971
Provider English Spoken: 
Provider Language(s)
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2498
After Hours Phone: (619) 515-2498
Website: www.blueshieldca.com/fad
D2. 初級保健名錄

Provider Gender: Male
License Number: PA16673
NPI: 1104836659
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 873-8940
After Hours Phone: (619) 873-8940
Website: N/A
Email: iselaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

PODIATRIST
CHARP, KENNETH
Provider ID: 478971
Provider Gender: Male
License Number: DPM1536
NPI: 1841384203
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

133 W MAIN ST STE 100
EL CAJON, CA 92020
Phone: (619) 873-8940
After Hours Phone: (619) 873-8940
Website: N/A
Email: iselaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-8:00PM

PODIATRIST
JUAREZ, LETICIA
Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2400
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

PODIATRIST
JUAREZ, LETICIA
Provider ID: 418340
Provider Gender: Female
License Number: DPM5661
NPI: 1508393778
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PODIATRIST
LE, DIANA
Provider ID: 418340
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR
Board Certified Specialty: No
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST
CUMMINGS, GEORGE
Provider ID: 418340
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

SA 8:30AM-5:30PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST
KUIOKA, TROY
Provider ID: 569910
Provider Gender: Male
License Number: PT42665
NPI: 1912640053
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org

REGISTERED PHYSICAL THERAPIST
MIGNEA, DAVID
Provider ID: 418340
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
525 E MAIN ST
EL CAJON, CA 92020
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.syhealth.org

ENCINITAS
CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA
Provider ID: 480243
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.fhcsd.org
Email: janellek@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA
Provider ID: 480243
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA
Provider ID: 480243
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
LOVERN, JENNIFER
Provider ID: 480243
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

CHIROPRACTOR
LOVERN, JENNIFER
Provider ID: 480243
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM
D2. 初級保健名錄

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM F 8:30AM-5:30PM

CHIROPRACTOR
LOVERN, JENNIFER
Provider ID: 480243
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
Provider English Spoken: Y
Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A

FAMILY PRACTICE
NATH, DEVARSHI
Provider ID: 480243
Provider Gender: Male
License Number: C54157
NPI: 1275630618
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A

Individuals in your PCP’s provider network may have their own mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, certain services may require authorization from the mental health service provider through Blue Shield, after which the service will be covered.

To access a list of mental health service providers online, please visit blueshieldca.com/fad.

FAMILY PRACTICE
NATH, DEVARSHI
Provider ID: 480243
Provider Gender: Male
License Number: C54157
NPI: 1275630618
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A

Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SAFI, ROOZCHEHR
Provider ID: 480243
Provider Gender: Female
License Number: A116562
NPI: 1659563641
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SAFI, ROOZCHEHR
Provider ID: 480243
Provider Gender: Female
License Number: A116562
NPI: 1659563641
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SAFI, ROOZCHEHR
Provider ID: 480243
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (707) 736-6767
After Hours Phone: (707) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
WILLIE, KADEN
Provider ID: 480243
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (707) 736-6767
After Hours Phone: (707) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
| PROVIDER | 1130 2ND ST  
ENCINITAS, CA 92024  
Phone: (707) 736-6767  
After Hours Phone: (707) 736-6767  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-TH 8:00AM-5:00PM  
F 8:30AM-5:30PM |
| FQHC  
TRUECARE,  
Provider ID: 480243  
NPI: 1245246917  
 Provider English Spoken: Y  
Cultural Competency: N  
 1130 2ND ST  
ENCINITAS, CA 92024  
Phone: (760) 753-7842  
Fax: (760) 736-8740  
After Hours Phone: (760) 753-7842  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-TH 8:00AM-5:00PM  
F 8:30AM-5:30PM |
| FAMILY PRACTICE  
WILLIE, KADEN  
Provider ID: 480243  
Provider Gender: Male  
License Number: 20A17306  
NPI: 1790133767  
 Provider English Spoken: Y  
Provider Language(s) Spoken: Portuguese  
Cultural Competency: N  
Board Certified Specialty: No  
1130 2ND ST  
ENCINITAS, CA 92024  
Phone: (707) 736-6767  
After Hours Phone: (707) 736-6767  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-TH 8:00AM-5:00PM  
F 8:30AM-5:30PM |
D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY
MOSTOFIAN, EIMANEH
Provider ID: 480243
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
Provider Language(s)
  Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
MOSTOFIAN, EIMANEH
Provider ID: 480243
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
Provider Language(s)
  Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
MOSTOFIAN, EIMANEH
Provider ID: 480243
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
Provider Language(s)
  Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:30AM-5:30PM

PEDIATRICS
BRION, SONJA
Provider ID: 386639
Provider Gender: Female
NPI: 1306817317
Provider English Spoken: Y
Provider Language(s)
  Spoken: Farsi, Spanish
Cultural Competency: N
D2. 初級保健名錄

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024
Phone: (760) 436-4511 Fax: (760) 436-5106
After Hours Phone: (760) 436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
MENDENHALL, ANNA
Provider ID: 386635
Provider Gender: Female
NPI: 1639140650
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
499 N EL CAMINO REAL STE B100 ENCINITAS, CA 92024
Phone: (760) 436-4511 Fax: (760) 436-5106
After Hours Phone: (760) 436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
MURPHY, CARMEL
Provider ID: 480243
Provider Gender: Female
License Number: A103940
NPI: 1790824787
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, Rady CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
1130 2ND ST ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
MURPHY, CARMEL
Provider ID: 480243
Provider Gender: Female
License Number: A103940
NPI: 1790824787
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDREN'S HOSPITAL SAN DIEGO
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDiatrics
MURPHY, CARMEL
Provider ID: 480243
Provider Gender: Female
License Number: A103940
NPI: 1790824787
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDREN'S HOSPITAL SAN DIEGO
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 753-7842
After Hours Phone: (760) 753-7842
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDiatrics
TOLBA, KAMEI
Provider ID: 386624
Provider Gender: Male
NPI: 1144221763
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL OAKLAND
Board Certified Specialty: No
499 N EL CAMINO REAL STE B100
ENCINITAS, CA 92024
Phone: (760) 436-4511
Fax: (760) 436-5106
After Hours Phone: (760) 436-4511
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

PHYSICIANS ASSISTANT
CHISWICK, GARY
Provider ID: 480243
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
FORSMAN, SHANA
Provider ID: 480243
Provider Gender: Female
License Number: PA19437
NPI: 1306026737
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
FORSMAN, SHANA
Provider ID: 480243
Provider Gender: Female
License Number: PA19437
NPI: 1306026737
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
FORSMAN, SHANA
Provider ID: 480243
Provider Gender: Female
License Number: PA19437
NPI: 1306026737
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
CARNEY, AMY
Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

CERTIFIED NURSE
PRACTITIONER
CARNEY, AMY
Provider ID: 206271
Provider Gender: Female
License Number: NP8169
NPI: 1164445227
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
728 E VALLEY PKWY
ESCONDIDO, CA 92025

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
### Certified Nurse Practitioner

**Hacinás, Reynaldo**
- **Provider ID:** 419344
- **Provider Gender:** Male
- **License Number:** NP95003024
- **NPI:** 1215304860
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Medical-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-TU 8:00AM-5:00PM
  
  W 9:00AM-5:00PM
  
  TH-F 8:00AM-5:00PM

**Kahl, Nicholas**
- **Provider ID:** 588941
- **Provider Gender:** Male
- **License Number:** NP95006360
- **NPI:** 1821306598
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Medical-Cal Open Panel:** Yes
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-TU 8:00AM-5:00PM
  
  W 9:00AM-5:00PM
  
  TH-F 8:00AM-5:00PM

**Mitchell, Cathy**
- **Provider ID:** 424775
- **Provider Gender:** Female
- **License Number:** NP4799
- **NPI:** 1356365365
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Medical-Cal Open Panel:** Yes
- **Min/Max Age:** 0\120
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-TU 8:00AM-5:00PM
  
  W 9:00AM-5:00PM
  
  TH-F 8:00AM-5:00PM
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
MITCHELL, CATHY
Provider ID: 424775
Provider Gender: Female
License Number: NP4799
NPI: 1356365365
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Board Certified Specialty: No
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
TODD, MIKAYLA
Provider ID: 588941
Provider Gender: Female
License Number: NP95005999
NPI: 1316478092
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Board Certified Specialty: No
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR
ROBINSON, DEAN
Provider ID: 206270
Provider Gender: Male
License Number: DC12036
NPI: 1851320337
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Hours: M-F 8:00AM-5:00PM

After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CHIROPRACTOR
ZECHA, RONALD
Provider ID: 206270
Provider Gender: Male
License Number: DC28605
NPI: 1427252121
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 460 N ELM ST
  ESCONDIDO, CA 92025
  Phone: (760) 520-8100
  After Hours Phone: (760) 520-8100
  Website: www.ihpsocal.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  SA 8:00AM-0:00PM

FAMILY PRACTICE
ARRIETA, NOEMI
Provider ID: 588941
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
- Board Certified Specialty: No
- 704 E GRAND AVE
  ESCONDIDO, CA 92025
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: N/A
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\120
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
AVILA, MICHAEL
Provider ID: 206270
Provider Gender: Male
License Number: A159727
NPI: 1962936450
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 460 N ELM ST
  ESCONDIDO, CA 92025
  Phone: (760) 520-8100
  After Hours Phone: (760) 520-8100
  Website: www.ihpsocal.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。

1140
D2. 初級保健名錄

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE
AVILA, MICHAEL
Provider ID: 206270
Provider Gender: Male
License Number: A159727
NPI: 1962936450
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihspsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CASTANER, ZALYA
Provider ID: 206270
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE
CASTANER, ZALYA
Provider ID: 206271
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-W 8:00AM-8:00PM
 TH-F 8:00AM-5:00PM

FAMILY PRACTICE
COBIAN, VANESSA
Provider ID: 206271
Provider Gender: Female
License Number: A145349
NPI: 1134513039
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 728 E VALLEY PKWY
  ESCONDIDO, CA 92025
  Phone: (760) 737-6900
  After Hours Phone: (760) 737-6900
  Website: N/A
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-W 8:00AM-8:00PM
  TH-F 8:00AM-5:00PM

FAMILY PRACTICE
COX, VICTORIA
Provider ID: 588941
Provider Gender: Female
License Number: C171064
NPI: 1093087819
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 704 E GRAND AVE
  ESCONDIDO, CA 92025
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: N/A
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\120
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
FERRAILO, NATALIE
Provider ID: 206270
Provider Gender: Female
License Number: A152372
NPI: 1306290143
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 460 N ELM ST
  ESCONDIDO, CA 92025
  Phone: (760) 520-8100
  After Hours Phone: (760) 520-8100
  Website: www.ihpsocal.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
COX, VICTORIA
Provider ID: 588941
Provider Gender: Female
License Number: C171064
NPI: 1093087819
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 704 E GRAND AVE
  ESCONDIDO, CA 92025
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: N/A
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\120
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
初級保健名錄

FERRAILOLO, NATALIE
Provider ID: 206270
Provider Gender: Female
License Number: A152372
NPI: 1306290143
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
HAMILTON, LISA MARIE
Provider ID: 652372
Provider Gender: Female
License Number: 20A14772
NPI: 1235576059
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (760) 546-2858
After Hours Phone: (760) 546-2858
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
KAUR, JATINDER
Provider ID: 206270
Provider Gender: Female
License Number: A120771
NPI: 1912141391
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
LAI, AMARA
Provider ID: 206271
Provider Gender: Female
License Number: A120348
NPI: 1912141391
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

NPI: 1790912855
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Hospital Affiliation: PALOMAR MEDICAL CENTER
- Board Certified Specialty: No
- 728 E VALLEY PKWY
  ESCONDIDO, CA 92025
- Phone: (760) 737-6900
- After Hours Phone: (760) 737-6900
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Hospital Affiliation: PALOMAR MEDICAL CENTER
- Board Certified Specialty: No
- 728 E VALLEY PKWY
  ESCONDIDO, CA 92025
- Phone: (760) 737-6900
- After Hours Phone: (760) 737-6900

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE
MATSHE, ZENZIWE
Provider ID: 665448
Provider Gender: Female
NPI: 1285256073
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 460 N ELM ST
  ESCONDIDO, CA 92025
- Phone: (760) 520-8100
- After Hours Phone: (760) 520-8100
- Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE
MCHENRY, KATHRYN
Provider ID: 206270
Provider Gender: Female
License Number: 20A14292
NPI: 1326458373
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 460 N ELM ST
  ESCONDIDO, CA 92025
- Phone: (760) 520-8100
- After Hours Phone: (760) 520-8100
- Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM
D2. 初級保健名錄

Hours: M-F 8:00AM-5:00PM  
SA 8:00AM-0:00PM

FAMILY PRACTICE
NAKAMURA, MELANIE
Provider ID: 206270  
Provider Gender: Female  
License Number: A107557  
NPI: 1104022672
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 460 N ELM ST  
ESCONDIDO, CA 92025  
- Phone: (760) 520-8100  
- After Hours Phone: (760) 520-8100  
- Website: www.ihpsocal.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:00AM-5:00PM  
SA 8:00AM-0:00PM

FAMILY PRACTICE
NAKAMURA, MELANIE
Provider ID: 206270  
Provider Gender: Female  
License Number: A107557  
NPI: 1104022672
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 460 N ELM ST  
ESCONDIDO, CA 92025  
- Phone: (760) 520-8100  
- After Hours Phone: (760) 520-8100  
- Website: www.ihpsocal.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:00AM-5:00PM  
SA 8:00AM-0:00PM

FAMILY PRACTICE
NAKAMURA, MELANIE
Provider ID: 206270  
Provider Gender: Female  
License Number: A107557  
NPI: 1104022672
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 460 N ELM ST  
ESCONDIDO, CA 92025  
- Phone: (760) 520-8100  
- After Hours Phone: (760) 520-8100  
- Website: www.ihpsocal.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:00AM-5:00PM  
SA 8:00AM-0:00PM

FAMILY PRACTICE
PATEL, JITENBHAI
Provider ID: 206270  
Provider Gender: Male  
License Number: A94128  
NPI: 1902921406
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 460 N ELM ST  
ESCONDIDO, CA 92025  
- Phone: (760) 520-8100  
- After Hours Phone: (760) 520-8100  
- Website: www.ihpsocal.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:00AM-5:00PM  
SA 8:00AM-0:00PM

FAMILY PRACTICE
PATEL, JITENBHAI
Provider ID: 206271  
Provider Gender: Male  
License Number: A94128  
NPI: 1902921406
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 728 E VALLEY PKWY  
ESCONDIDO, CA 92025  
- Phone: (760) 737-6900  
- After Hours Phone: (760) 737-6900  
- Website: N/A  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PATEL, JITENBHAI
Provider ID: 206271  
Provider Gender: Male  
License Number: A94128  
NPI: 1902921406
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 460 N ELM ST  
ESCONDIDO, CA 92025  
- Phone: (760) 520-8100  
- After Hours Phone: (760) 520-8100  
- Website: www.ihpsocal.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Cultural Competency: N
Board Certified Specialty: No
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

RAO, USHA
Provider ID: 588941
Provider Gender: Female
License Number: A148750
NPI: 1184019911
Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
RASHCOVSKY SCHIFF, KARIN
Provider ID: 206270
Provider Gender: Female
License Number: A82173
NPI: 1699706333
Provider English Spoken: Y
Provider Language(s)
Spoken: French
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
RODARTE, GABRIEL
Provider ID: 206266
Provider Gender: Male
License Number: A87906
NPI: 1184649212
520-8100
D2. 初級保健名錄

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
After Hours Phone: (760) 520-8340
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
SANDHU, BASANT
Provider ID: 206271
Provider Gender: Male
License Number: A140398
NPI: 1265795744
- Provider English Spoken: Y
- Provider Language(s) Spoken: German, Hindi, Punjabi, Spanish
- Cultural Competency: N
- Board Certified Specialty: No

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE
RODARTE, GABRIEL
Provider ID: 206266
Provider Gender: Male
License Number: A87906
NPI: 1184649212
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE
SANDHU, BASANT
Provider ID: 206271
Provider Gender: Male
License Number: A140398
NPI: 1265795744
- Provider English Spoken: Y
- Provider Language(s) Spoken: German, Hindi, Punjabi, Spanish
- Cultural Competency: N
- Board Certified Specialty: No

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:00AM-8:00PM
TH-F 8:00AM-5:00PM

FAMILY PRACTICE
SCHULTZ, JAMES
Provider ID: 206271
Provider Gender: Male
License Number: G61829
NPI: 1356376164
- Provider English Spoken: Y
- Provider Language(s) Spoken: Farsi, Greek, Spanish
- Cultural Competency: N
- Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER
- Board Certified Specialty: No

728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
D2. 初級保健名錄

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SCHULTZ, JAMES
Provider ID: 206271
Provider Gender: Male
License Number: G61829
NPI: 1356376164
- Provider English Spoken: Y
- Provider Language(s) Spoken: Farsi, Greek, Spanish
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL,
PALOMAR MEDICAL CENTER
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SCHULTZ, JAMES
Provider ID: 206270
Provider Gender: Male
License Number: A109655
NPI: 1902058928
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
TANTOD, KULIN
Provider ID: 206270
Provider Gender: Male
License Number: A109655
NPI: 1902058928
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

Provider ID: 206270
Provider Gender: Male
License Number: A109655
NPI: 1902058928
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
- Phone: (760) 520-8100
- After Hours Phone: (760) 520-8100
- Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FAMILY PRACTICE
THOMPSON, CHERYL
Provider ID: 206270
Provider Gender: Female
License Number: A102687
NPI: 1548429863
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
- Phone: (760) 520-8100
- After Hours Phone: (760) 520-8100
- Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FQHC
CENTRO MEDICO ESCONDIDO,
Provider ID: 419344
NPI: 1023349883
- Provider English Spoken: Y
Cultural Competency: N
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
- Phone: (760) 871-0606
- Fax: (858) 634-6918
- After Hours Phone: (760) 871-0606
- Website: N
Email: iselaoocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM

FQHC
CENTRO MEDICO ESCONDIDO,
Provider ID: 419344
NPI: 1023349883
- Provider English Spoken: Y
Cultural Competency: N
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
- Phone: (760) 871-0606
- Fax: (858) 634-6918
- After Hours Phone: (760) 871-0606
- Website: N
Email: iselaoocha@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM
D2. 初級保健名錄

FQHC
ESCONDIDO FAMILY HEALTH CENTER,
Provider ID: 652372
NPI: 1417640491
Provider English Spoken: Y
Cultural Competency: N
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (619) 515-2474
After Hours Phone: (619) 515-2474
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEIGHBORHOOD
HEALTHCARE ESCONDIDO,
Provider ID: 206270
NPI: 1598703647
Provider English Spoken: Y
Cultural Competency: N
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 466-2745
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE PEDIATRICS AND PRENATAL,
Provider ID: 424775
NPI: 1437335353
Provider English Spoken: Y
Cultural Competency: N
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
Fax: (360) 462-2747
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
ESCONDIDO FAMILY HEALTH CENTER,
Provider ID: 652372
NPI: 1417640491
Provider English Spoken: Y
Cultural Competency: N
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (619) 515-2474
After Hours Phone: (619) 515-2474
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
NEIGHBORHOOD
HEALTHCARE ESCONDIDO,
Provider ID: 206270
NPI: 1598703647
Provider English Spoken: Y
Cultural Competency: N
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (360) 466-2745
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE PEDS AND PRENATAL,
Provider ID: 206266
NPI: 1265618185
Provider English Spoken: Y
Cultural Competency: N
425 N DATE ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8340
Fax: (360) 462-2752
✆ After Hours Phone: (760) 520-8340
Website: www.ihapsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE VALLEY PARKWAY,
Provider ID: 206271
NPI: 1720264641
Provider English Spoken: Y
Cultural Competency: N
728 E VALLEY PKWY
ESCONDIDO, CA 92025
☎ Phone: (760) 737-6900
Fax: (360) 462-2748
☎ After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
ESCONDIDO FAMILY MEDICINE,
Provider ID: 588941
NPI: 1801438239
Provider English Spoken: Y
Cultural Competency: N
704 E GRAND AVE
ESCONDIDO, CA 92025
☎ Phone: (619) 662-4100
Fax: (619) 662-7952
☎ After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 9:00AM-5:00PM
TH-F 8:00AM-5:00PM
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER

FQHC
SAN YSIDRO HEALTH
ESCONDIDO FAMILY MEDICINE,
Provider ID: 588941
NPI: 1801438239
Provider English Spoken: Y
Cultural Competency: N
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (619) 662-7952
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
AGUERO, AMETHYST
Provider ID: 652372
Provider Gender: Female
License Number: 20A19473
NPI: 1568021913
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
128 N BROADWAY
ESCONDIDO, CA 92025
Phone: (760) 546-2858
After Hours Phone: (760) 546-2858
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
CARRERA, JORGE
Provider ID: 588941
Provider Gender: Male
License Number: G58033
NPI: 1184728586
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL):
D2. 初級保健名錄

<table>
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<tr>
<th>Provider ID</th>
<th>Provider Name</th>
<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Cultural Competency</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Website</th>
<th>Medi-Cal Open Panel</th>
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<th>American Sign Language (ASL)</th>
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<tr>
<td>206270</td>
<td>VETTICADEN, SANTOSH</td>
<td>Male</td>
<td>C53062</td>
<td>1679102461</td>
<td>Y</td>
<td>N</td>
<td>No</td>
<td>460 N ELM ST</td>
<td>(760) 520-8100</td>
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<td><a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
<td>Yes</td>
<td>0\150</td>
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<tr>
<td>204527</td>
<td>CHEN, MARGARET</td>
<td>Female</td>
<td>A61751</td>
<td>1659305084</td>
<td>Y</td>
<td>N</td>
<td>No</td>
<td>460 N ELM ST</td>
<td>(760) 520-8100</td>
<td>(760) 520-8100</td>
<td>N/A</td>
<td>Yes</td>
<td>18\999</td>
<td>N</td>
</tr>
<tr>
<td>206270</td>
<td>VETTICADEN, SANTOSH</td>
<td>Male</td>
<td>C53062</td>
<td>1679102461</td>
<td>Y</td>
<td>N</td>
<td>No</td>
<td>460 N ELM ST</td>
<td>(760) 520-8100</td>
<td>(760) 520-8100</td>
<td><a href="http://www.ihpsocal.org">www.ihpsocal.org</a></td>
<td>Yes</td>
<td>0\150</td>
<td>N</td>
</tr>
</tbody>
</table>

*Accessibility: CONTACT PROVIDER

**INTERNAL MEDICINE**

**CHEN, MARGARET**

Provider ID: 206270
Provider Gender: Female
License Number: A61751
NPI: 1659305084
Provider English Spoken: Y
Provider Language(s)
  - Greek, Spanish
Cultural Competency: N
Board Certified Specialty: No

Address: 460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM
D2. 初級保健名錄

N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS
AGUILAR, EDITA
Provider ID: 424775
Provider Gender: Female
License Number: A56054
NPI: 1467407411
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
AGUILAR, EDITA
Provider ID: 206266
Provider Gender: Female
License Number: A56054
NPI: 1467407411
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
AGUILAR, EDITA
Provider ID: 424775
Provider Gender: Female
License Number: A56054
NPI: 1467407411
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
AGUILAR, EDITA
Provider ID: 206266
Provider Gender: Female
License Number: A56054
NPI: 1467407411
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
425 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760) 520-8340
 Website: www.ihpsocal.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\21
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
ALDANA, NANCY
Provider ID: 424775
Provider Gender: Female
License Number: A62467
NPI: 1558371963
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Board Certified Specialty: No
426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760) 520-8340
 Website: N/A
 Medi-Cal Open Panel: Yes

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Min/Max Age: 0\21
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
ALDANA, NANCY
Provider ID: 424775
Provider Gender: Female
License Number: A62467
NPI: 1558371963
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, Rady
CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL
HOSPITAL ENCINITAS
Board Certified Specialty: No
426 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8340
 After Hours Phone: (760) 520-8340
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
CHOW, BYRON
Provider ID: 206270
Provider Gender: Male
License Number: A78116
NPI: 1619907607
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: Rady
CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
 Phone: (760) 520-8100
 After Hours Phone: (760) 520-8100
 Website: www.ihapsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
COHEN, CARA
Provider ID: 661879
Provider Gender: Female
NPI: 1215021274
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, Rady
CHILDRENS HOSPITAL SAN DIEGO, Palomar Medical Center,
UCSF Benioff Children's Hospital Oakland
Board Certified Specialty: No
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
 Phone: (760) 746-2641
 Fax: (760) 740-2178
 After Hours Phone: (760) 746-2641
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
COULLAHAN, JESSICA
D2. 初級保健名錄

Provider ID: 661887
Provider Gender: Female
NPI: 1750579108
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children’s Hospital San Diego, Palomar Medical Center
Board Certified Specialty: No

625 Citracado PKWY STE 100
Escondido, CA 92025
Phone: (760) 746-2641
Fax: (760) 740-2178
After Hours Phone: (760) 746-2641
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CURET, ZULMA
Provider ID: 206270
Provider Gender: Female
License Number: A119661
NPI: 1841561107
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children’s Hospital San Diego
Board Certified Specialty: No

460 N Elm St
Escondido, CA 92025
Phone: (760) 520-8100
After Hours Phone: (760) 520-8100
Website: www.ihapsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
DOUSHI, NEELIMA
Provider ID: 424775
Provider Gender: Female
License Number: A67626
NPI: 1417921578
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children’s Hospital San Diego
Board Certified Specialty: No

426 N Date St
Escondido, CA 92025
Phone: (760) 690-5900
After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
DOUSHI, NEELIMA
Provider ID: 640252
Provider Gender: Female
NPI: 1417921578
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children’s Hospital San Diego
Board Certified Specialty: No

426 N Date St
Escondido, CA 92025
Phone: (833) 867-4642
Fax: (360) 462-2752
D2. 初級保健名錄

After Hours Phone: (833) 867-4642
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
DOSHI, NEELIMA
Provider ID: 424775
Provider Gender: Female
License Number: A67626
NPI: 1417921578
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: RADIY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
After Hours Phone: (760) 690-5900
Website: N/A
Email: iselaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM

PEDIATRICS
IBRAHIM, MAGED
Provider ID: 419344
Provider Gender: Male
License Number: CI41296
NPI: 1306852934
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: POMONA VALLEY HOSP MED CTR, SAN ANTONIO COMM HOSP
Board Certified Specialty: No
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
Phone: (760) 871-0606
After Hours Phone: (760) 871-0606
Website: N
Email: iselaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
MALEKSHAMRAN, KEYVAN
Provider ID: 419344
Provider Gender: Male
License Number: A94845
NPI: 1952466112
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
Phone: (760) 871-0606
After Hours Phone: (760) 871-0606
Website: N
Email: iselaochoa@borregohealth.org
D2. 初級保健名錄

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999
American Sign Language (ASL): 
N  
Accessability: CONTACT PROVIDER

PEDIATRICS
MALEKSHAMRAN, KEYVAN  
Provider ID: 419344  
Provider Gender: Male  
License Number: A94845  
NPI: 1952466112  
Provider English Spoken: Y  
Provider Language(s):  
Spoken: Farsi, Persian, Spanish  
Cultural Competency: N  
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR  
Board Certified Specialty: No  
625 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92025  
Phone: (760) 746-2641  
Fax: (760) 740-2178  
After Hours Phone: (760) 746-2641  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): 
N  
Accessability: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
STRAZICICH, KARLA  
Provider ID: 206270  
Provider Gender: Female  
License Number: A45413  
NPI: 1134154958  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PALOMAR MEDICAL CENTER  
Board Certified Specialty: No  
460 N ELM ST  
ESCONDIDO, CA 92025  
Phone: (760) 520-8100  
After Hours Phone: (760) 520-8100  
Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): 
N  
Accessability: CONTACT PROVIDER

PEDIATRICS
SONG, JOYCE  
Provider ID: 661892  
Provider Gender: Female  
NPI: 1417510694  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
625 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92025  
Phone: (760) 746-2641  
Fax: (760) 740-2178  
After Hours Phone: (760) 746-2641  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): 
N  
Accessability: CONTACT PROVIDER

PEDIATRICS
STRAZICICH, KARLA  
Provider ID: 206270  
Provider Gender: Female  
License Number: A45413  
NPI: 1134154958  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
460 N ELM ST  
ESCONDIDO, CA 92025  
Phone: (760) 520-8100  
After Hours Phone: (760) 520-8100  
Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): 
N  
Accessability: CONTACT PROVIDER

PEDIATRICS
TELLECHEA-SANCHEZ, SELMIRA  
Provider ID: 424775  
Provider Gender: Female  
License Number: G83438  
NPI: 1730288747  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
426 N DATE ST  
ESCONDIDO, CA 92025  
Phone: (760) 690-5900  
After Hours Phone: (760) 690-5900
D2. 初級保健名錄

Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
TELLECHEA-SANCHEZ, SELMIRA
Provider ID: 424775
Provider Gender: Female
License Number: G83438
NPI: 1730288747
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
246 N DATE ST
ESCONDIDO, CA 92025
 Phone: (760) 690-5900
 After Hours Phone: (760) 690-5900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM

PEDIATRICS
THIRUNAGARI, HARRSHA
Provider ID: 419344
Provider Gender: Female
License Number: A64928
NPI: 1447472212
 Provider English Spoken: Y
Provider Language(s)
 Spoken: Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGINAL MEDICAL CENTER,
RIVERSIDE COMMUNITY HOSP, Parkview Community Hospital Medical Center
Board Certified Specialty: No
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760) 871-0606
 Website: N
 Email: iselaaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM

PEDIATRICS
THIRUNAGARI, HARRSHA
Provider ID: 419344
Provider Gender: Female
License Number: A64928
NPI: 1447472212
 Provider English Spoken: Y
Provider Language(s)
 Spoken: Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGINAL MEDICAL CENTER,
RIVERSIDE COMMUNITY HOSP, Parkview Community Hospital Medical Center
Board Certified Specialty: No
1121 E WASHINGTON AVE
ESCONDIDO, CA 92025
 Phone: (760) 871-0606
 After Hours Phone: (760) 871-0606
 Website: N
 Email: iselaaochoa@borregohealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-0:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-0:00PM

PEDIATRICS
ZANDKARIMI, FARIBA
Provider ID: 87737
Provider Gender: Female
NPI: 1356373674
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: MERCY GENERAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Board Certified Specialty: No
240 W MISSION AVE STE A
ESCONDIDO, CA 92025
 Phone: (760) 747-5400
 Fax: (760) 747-2286
D2. 初級保健名錄

 PHYSICIANS ASSISTANT
BAISLEY, SHAWN
Provider ID: 588941
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

 PHYSICIANS ASSISTANT
SHARPE, NORMA
Provider ID: 588941
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

 PHYSICIANS ASSISTANT
BAISLEY, SHAWN
Provider ID: 588941
Provider Gender: Male
License Number: PA52347
NPI: 1376936120
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

 PHYSICIANS ASSISTANT
SHARPE, NORMA
Provider ID: 588941
Provider Gender: Female
License Number: PA20490
NPI: 1619100237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

 PODIATRIST
NEGRON, RICARDO
Provider ID: 206271
Provider Gender: Male
License Number: DPM5260
NPI: 1932548393
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence St Joseph Hospital
Board Certified Specialty: No
728 E VALLEY PKWY
ESCONDIDO, CA 92025
Phone: (760) 737-6900
After Hours Phone: (760) 737-6900
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PODIATRIST
NEGRON, RICARDO
Provider ID: 206271
Provider Gender: Male
License Number: DPM5260
NPI: 1932548393
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Providence St Joseph Hospital
Board Certified Specialty: No

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
KELLEHER, BRIDGET
Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FALLBROOK

CERTIFIED NURSE PRACTITIONER
KELLEHER, BRIDGET
Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
KELLEHER, BRIDGET
Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No

321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

MEDICAL CTR
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommmunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
KELLEHER, BRIDGET
Provider ID: 624122
Provider Gender: Female
License Number: NP95003447
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommmunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
RACKHAM, KELLY
Provider ID: 624122
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommmunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
初級保健名錄

CERTIFIED NURSE PRACTITIONER
RACKHAM, KELLY
Provider ID: 624122
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
RACKHAM, KELLY
Provider ID: 624122
Provider Gender: Male
License Number: NP95015717
NPI: 1801497284
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
ZAMPELLO, LISA
Provider ID: 624122
Provider Gender: Female
License Number: A145924
NPI: 1477933026
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
D2. 初級保健名錄

Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ZAMPELLO, LISA
Provider ID: 624122
Provider Gender: Female
License Number: A145924
NPI: 1477933026
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ZAMPELLO, LISA
Provider ID: 624122
Provider Gender: Female
License Number: A145924
NPI: 1477933026
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ZAMPELLO, LISA
Provider ID: 624122
Provider Gender: Female
License Number: A145924
NPI: 1477933026
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ZAMPELLO, LISA
Provider ID: 624122
Provider Gender: Female
License Number: A145924
NPI: 1477933026
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
D2. 初級保健名錄

FALLBROOK FAMILY HLTH CTR,
Provider ID: 183910
NPI: 1982756086
 Provider English Spoken: Y
Cultural Competency: N
1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4720
Fax: (760) 451-4700
 After Hours Phone: (760) 451-4720
 Website: N/A
Email: a.escobeclo@chsica.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC
VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1316501562
 Provider English Spoken: Y
Cultural Competency: N
321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

FQHC
FALLBROOK FAMILY HLTH CTR,
Provider ID: 183910
NPI: 1982756086
 Provider English Spoken: Y
Cultural Competency: N
1328 S MISSION RD
FALLBROOK, CA 92028
 Phone: (760) 451-4720
Fax: (760) 451-4700
 After Hours Phone: (760) 451-4720
 Website: N/A
Email: a.escobeclo@chsica.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC
VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1316501562
 Provider English Spoken: Y
Cultural Competency: N
321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

FQHC
VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1649662719
 Provider English Spoken: Y
Cultural Competency: N
321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

FQHC
VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1851300123
 Provider English Spoken: Y
Cultural Competency: N
321 E ALVARADO ST
FALLBROOK, CA 92028
 Phone: (760) 723-6200
 After Hours Phone: (760) 723-6200
 Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM
D2. 初級保健名錄

Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

FQHC
VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1316501562
Provider English Spoken: Y
Cultural Competency: N
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

PEDIATRICS
DELMAR, ALEXANDER
Provider ID: 446292
Provider Gender: Male
NPI: 1578054707
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Board Certified Specialty: No
1107 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-0070
After Hours Phone: (760) 451-1499
Fax: (760) 451-0070
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

MEDICAID
VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1316501562
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

FQHC
VISTA COMMUNITY CLINIC,
Provider ID: 624122
NPI: 1649662719
Provider English Spoken: Y
Cultural Competency: N
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
After Hours Phone: (760) 723-6200
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-4:00PM
TU 8:00AM-0:30PM
W-TH 8:00AM-5:00PM

PEDIATRICS
PAIK, JULIANA
Provider ID: 504522
Provider Gender: Female
NPI: 1528167087
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Southwest Healthcare Rancho Springs Hospital
Board Certified Specialty: No
1107 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-0070
After Hours Phone: (760) 451-1499
Fax: (760) 451-0070
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
ROBINSON, DAISY
Provider ID: 230579
Provider Gender: Female
NPI: 1659389740
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Board Certified Specialty: No
1107 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-0070
After Hours Phone: (760) 451-1499
Fax: (760) 451-0070
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760) 723-6200
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-4:00PM

PEDIATRICS
VU, WENDY
Provider ID: 183910
Provider Gender: Female
License Number: A169529
NPI: 1508148370
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4770
After Hours Phone: (760) 451-4770
Website: N/A
Email: a.escobeclo@chsica.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-7:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE
JOHNSON, DANIEL
Provider ID: 179678
Provider Gender: Male
License Number: 20A9393
NPI: 1245311216
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
D2. 初級保健名錄

N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-9:00PM
F 8:30AM-5:00PM
SA 8:30AM-2:00PM

FQHC
IMPERIAL BEACH HEALTH CENTER,
Provider ID: 179678
NPI: 1790718351
Provider English Spoken: Y
Cultural Competency: N
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE
RYAN, DANA
Provider ID: 179678
Provider Gender: Female
License Number: A66830
NPI: 1780609990
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
DOKICH, SRETENKA
Provider ID: 179678
Provider Gender: Female
License Number: A51447
NPI: 1154409035
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
DOKICH, SRETENKA
Provider ID: 179678
Provider Gender: Female
D2. 初級保健名錄

License Number: A51447
NPI: 1154409035
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No

LA JOLLA

PEDIATRICS

GANDHI, SHEETAL
Provider ID: 282029
Provider Gender: Female
NPI: 1700858859
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

PAEDIATRICS

HUNTER, WENDY
Provider ID: 377597
Provider Gender: Female
NPI: 1053515551
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No

PARSONS, GENEVIEVE
Provider ID: 24122
Provider Gender: Female
NPI: 1699700914
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-12:00PM

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-12:00PM

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-12:00PM
D2. 初級保健名錄

- **Pastore, Simone**
  - Provider ID: 600881
  - Provider Gender: Female
  - NPI: 1528588134
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDREN'S HOSPITAL SAN DIEGO
  - Board Certified Specialty: No
  - 4150 REGENTS PARK ROW STE 355
    - LA JOLLA, CA 92037
  - Phone: (858) 457-2043
  - Fax: (858) 457-2092
  - After Hours Phone: (858) 457-2043
  - Website: N/A
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0-19
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:00AM-5:00PM

- **Shah, Meera**
  - Provider ID: 145167
  - Provider Gender: Female
  - NPI: 1720300239
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
  - Board Certified Specialty: No
  - 7300 GIRARD AVE STE 106
    - LA JOLLA, CA 92037
  - Phone: (858) 459-4351
  - Fax: (858) 459-4399
  - After Hours Phone: (858) 457-2043
  - Website: N/A
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0-19
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:00AM-5:00PM

- **Roberts, Kendall**
  - Provider ID: 48933
  - Provider Gender: Male
  - NPI: 1265762033
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDREN'S HOSPITAL SAN DIEGO
  - Board Certified Specialty: No
  - 4150 REGENTS PARK ROW STE 355
    - LA JOLLA, CA 92037
  - Phone: (858) 457-2043
  - Fax: (858) 457-2092
  - After Hours Phone: (858) 457-2043
  - Website: N/A
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0-19
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:00AM-5:00PM

**Pediatrics**

**Certified Nurse**
D2. 初級保健名錄

**PRACTITIONER**

WARD, KATHERINE  
Provider ID: 480827  
Provider Gender: Female  
License Number: NP95017921  
NPI: 1477223576  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
8881 FLETCHER PKWY STE 200  
LA MESA, CA 91942  
Phone: (619) 464-6434  
After Hours Phone: (619) 464-6434  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\21  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**

PATEL, HEMANSHU  
Provider ID: 664660  
Provider Gender: Male  
NPI: 1255777439  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: VICTOR VALLEY COMMUNITY HOSP, BARSTOW COMMUNITY HOSPITAL, DESERT VALLEY HOSPITAL, Providence St Mary Medical Center, VICTOR VALLEY GLOBAL MED CTR  
Board Certified Specialty: No  
7339 EL CAJON BLVD STE I  
LA MESA, CA 91942  
Phone: (619) 698-0606  
Fax: (619) 332-5149  
After Hours Phone: (619) 698-0606  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

**FQHC**

LA MESA PEDIATRICS,  
Provider ID: 480827  
NPI: 1033759311  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
8881 FLETCHER PKWY STE 200  
LA MESA, CA 91942  
Phone: (619) 464-6434  
Fax: (619) 464-5109  
After Hours Phone: (619) 464-6434  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\21  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

WARD, KATHERINE  
Provider ID: 480827  
Provider Gender: Female  
License Number: NP95017921  
NPI: 1477223576  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
8881 FLETCHER PKWY STE 200  
LA MESA, CA 91942  
Phone: (619) 464-6434  
After Hours Phone: (619) 464-6434  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\21  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

**FAMILY PRACTICE**

SINGH, RAMENDEEP  
Provider ID: 664666  
Provider Gender: Female  
NPI: 1255777421  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
7339 EL CAJON BLVD STE I  
LA MESA, CA 91942  
Phone: (619) 698-0606  
Fax: (619) 698-0606  
After Hours Phone: (619) 698-0606  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**FQHC**

LA MESA PEDIATRICS,
D2. 初級保健名錄

Provider ID: 480827
NPI: 1033759311
Provider English Spoken: Y
Cultural Competency: N
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BULLOCH, EDGAR
Provider ID: 480827
Provider Gender: Male
License Number: A113241
NPI: 1508046376
Provider English Spoken: Y
Provider Language(s): Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
Phone: (619) 464-6434
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
PAPA, RHETT
Provider ID: 480827
Provider Gender: Male
License Number: 20A11733
NPI: 1063642312
Provider English Spoken: Y
Provider Language(s): Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
Phone: (619) 464-6434
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
PEDIATRICS
ALSHEIKH, HUDA
Provider ID: 435468
Provider Gender: Female
NPI: 1487746855
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 7:30AM-6:00PM
W-F 7:30AM-6:30PM
SA 8:30AM-5:00PM

PEDIATRICS
ALSHEIKH, HUDA
Provider ID: 480827
Provider Gender: Female
License Number: C133872
NPI: 1487746855
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
Phone: (619) 464-6434
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CLAY, CORRIE
Provider ID: 536652
Provider Gender: Female
NPI: 1437207750
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
Phone: (619) 464-6434
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

PEDIATRICS
EMPIE, KRISTEN
Provider ID: 648986
Provider Gender: Female
NPI: 1093343105
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Provider ID: 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

PEDIATRICS
GIANFORTUNE, RACHEL
Provider ID: 433091
Provider Gender: Female
NPI: 1912193301
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
Provider ID: 8881 FLETCHER PKWY STE 205
LA MESA, CA 91942
Phone: (619) 464-6434
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
EMPIE, KRISTEN
Provider ID: 648987
Provider Gender: Female
NPI: 1093343105
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Provider ID: 8881 FLETCHER PKWY STE 200
LA MESA, CA 91942
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 11:30AM-3:30PM

PEDIATRICS
IMUS, PAUL
D2. 初級保健名錄

Provider ID: 239590
Provider Gender: Male
NPI: 1104116680
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Mary Birch Hosp for Women and Newborns, Grossmont Hospital
Board Certified Specialty: No

8881 Fletcher Pkwy Ste 200
La Mesa, CA 91942
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619) 401-0404
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

Provider ID: 275099
Provider Gender: Female
NPI: 1194922419
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Mary Birch Hosp for Women and Newborns, Sharp Memorial Hospital
Board Certified Specialty: No

6942 University Ave Ste A
La Mesa, CA 91942
Phone: (619) 698-2184
Fax: (619) 698-2084
After Hours Phone: (619) 698-2184
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

Provider ID: 538098
Provider Gender: Female
NPI: 1538685524
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

8881 Fletcher Pkwy Ste 200
La Mesa, CA 91942
Phone: (619) 401-0404
Fax: (619) 401-0522
After Hours Phone: (619) 401-0404
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

Provider ID: 60736
Provider Gender: Male
NPI: 1568552727
Provider English Spoken: Y
Provider Language(s)
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Mary Birch Hosp for Women and Newborns, Sharp Memorial Hospital
Board Certified Specialty: No

8881 Fletcher Pkwy Ste 200
La Mesa, CA 91942
Phone: (619) 464-6434
Fax: (619) 464-5109
After Hours Phone: (619) 464-6434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

FERRAIOLILO, NATALIE
Provider ID: 353843
Provider Gender: Female
License Number: A152372
NPI: 1306290143
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
LIU BARBARO, DOROTHY
Provider ID: 353843
Provider Gender: Female
License Number: A115342
NPI: 1851602270
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N
Board Certified Specialty: No
10039 VINE ST
LAKESIDE, CA 92040
Phone: (619) 440-2751
After Hours Phone: (619) 440-2751
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE LAKESIDE,
Provider ID: 353843
NPI: 1932384120
Provider English Spoken: Y
Cultural Competency: N
10039 VINE ST
LAKESIDE, CA 92040
Phone: (858) 218-3000
Fax: (360) 462-2744
After Hours Phone: (858) 218-3000
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

1177
D2. 初級保健名錄

**Cultural Competency:** N

**GENERAL PRACTICE**

**MANNINO, ELIZABETH**  
Provider ID: 353843  
Provider Gender: Female  
License Number: A43914  
NPI: 1548290463  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Italian, Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

**INTERNAL MEDICINE**

**MCFARLAND, NATHAN**  
Provider ID: 353843  
Provider Gender: Male  
License Number: A75411  
NPI: 1265462196  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Italian, Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

**CERTIFIED NURSE PRACTITIONER**

**ALLEN, KATHERINE**  
Provider ID: 419139  
Provider Gender: Female  
License Number: NP95009933  
NPI: 1831557024

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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
CERTIFIED NURSE PRACTITIONER
ARVIZU, PALOMA
Provider ID: 419139
Provider Gender: Female
License Number: NP95008782
NPI: 1689139396
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: RN428876
NPI: 1780603597
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
ALLEN, KATHERINE
Provider ID: 419139
Provider Gender: Female
License Number: NP95009933
NPI: 1831557024
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
D2. 初級保健名錄

SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: NP15444
NPI: 1780603597
- Provider English Spoken: Y
- Provider Language(s): Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
- Phone: (619) 515-2550
- After Hours Phone: (619) 515-2550
- Website: N/A
  Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: NP15444
NPI: 1780603597
- Provider English Spoken: Y
- Provider Language(s): Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
- Phone: (619) 515-2550
- After Hours Phone: (619) 515-2550
- Website: N/A
  Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
SMITH, SHARON
Provider ID: 419139
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
- Provider English Spoken: Y
  Cultural Competency: N
- Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
- Phone: (619) 515-2550
- After Hours Phone: (619) 515-2550
- Website: N/A
  Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
TOTH, JESSICA
Provider ID: 419139
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
- Provider English Spoken: Y
  Cultural Competency: N
- Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
- Phone: (619) 515-2550
- After Hours Phone: (619) 515-2550
- Website: N/A
  Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
TOTH, JESSICA
Provider ID: 419139
Provider Gender: Female
License Number: NP95001050
NPI: 1578993788
- Provider English Spoken: Y
  Cultural Competency: N
- Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
- Phone: (619) 515-2550
- After Hours Phone: (619) 515-2550
- Website: N/A
  Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

**PRACTITIONER**  
**WILLIAMS, TAKISHA**  
Provider ID: 419139  
Provider Gender: Female  
License Number: NP95013978  
NPI: 1881727386  
- Provider English Spoken: Y  
- Provider Language(s) Spoken: Spanish  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 7592 BROADWAY  
- LEMON GROVE, CA 91945  
- Phone: (619) 515-2550  
- After Hours Phone: (619) 515-2550  
- Website: N/A  
- Email: valeriade@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**  
**DORN, TIA**  
Provider ID: 419139  
Provider Gender: Female  
License Number: C172318  
NPI: 1285074740  
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 7592 BROADWAY  
- LEMON GROVE, CA 91945  
- Phone: (619) 515-2550  
- After Hours Phone: (619) 515-2550  
- Website: N/A  
- Email: valeriade@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**  
**KIM, YUHEE**  
Provider ID: 419139  
Provider Gender: Female  
License Number: A107323  
NPI: 1629289400  
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 7592 BROADWAY  
- LEMON GROVE, CA 91945  
- Phone: (619) 515-2550  
- After Hours Phone: (619) 515-2550  
- Website: N/A  
- Email: valeriade@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**  
**WILLIAMS, TAKISHA**  
Provider ID: 419139  
Provider Gender: Female  
License Number: NP95013978  
NPI: 1881727386  
- Provider English Spoken: Y  
- Provider Language(s) Spoken: Spanish  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 7592 BROADWAY  
- LEMON GROVE, CA 91945  
- Phone: (619) 515-2550  
- After Hours Phone: (619) 515-2550  
- Website: N/A  
- Email: valeriade@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**  
**DORN, TIA**  
Provider ID: 419139  
Provider Gender: Female  
License Number: C172318  
NPI: 1285074740  
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 7592 BROADWAY  
- LEMON GROVE, CA 91945  
- Phone: (619) 515-2550  
- After Hours Phone: (619) 515-2550  
- Website: N/A  
- Email: valeriade@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**  
**KIM, YUHEE**  
Provider ID: 419139  
Provider Gender: Female  
License Number: A107323  
NPI: 1629289400  
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 7592 BROADWAY  
- LEMON GROVE, CA 91945  
- Phone: (619) 515-2550  
- After Hours Phone: (619) 515-2550  
- Website: N/A  
- Email: valeriade@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**  
**KIM, YUHEE**  
Provider ID: 419139  
Provider Gender: Female  
License Number: A107323  
NPI: 1629289400  
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 7592 BROADWAY  
- LEMON GROVE, CA 91945  
- Phone: (619) 515-2550  
- After Hours Phone: (619) 515-2550  
- Website: N/A  
- Email: valeriade@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**  
**KIM, YUHEE**  
Provider ID: 419139  
Provider Gender: Female  
License Number: A107323  
NPI: 1629289400  
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 7592 BROADWAY  
- LEMON GROVE, CA 91945  
- Phone: (619) 515-2550  
- After Hours Phone: (619) 515-2550  
- Website: N/A  
- Email: valeriade@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**  
**KIM, YUHEE**  
Provider ID: 419139  
Provider Gender: Female  
License Number: A107323  
NPI: 1629289400  
- Provider English Spoken: Y  
- Cultural Competency: N  
- Board Certified Specialty: No  
- 7592 BROADWAY  
- LEMON GROVE, CA 91945  
- Phone: (619) 515-2550  
- After Hours Phone: (619) 515-2550  
- Website: N/A  
- Email: valeriade@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

KIM, YUHEE
Provider ID: 419139
Provider Gender: Female
License Number: A107323
NPI: 1629289400
Ŭ Provider English Spoken: Y
Ŭ Provider Language(s) Spoken: Korean
Cultural Competency: N
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Ŭ Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Ŭ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
GALLARES, DANIEL
Provider ID: 419139
Provider Gender: Male
License Number: A165925
NPI: 1245689488
Ŭ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
Fax: (619) 825-9577
Ŭ After Hours Phone: (619) 515-2550
Ŭ Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Ŭ Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
MAHDAI, SUZAN
Provider ID: 419139
Provider Gender: Female
License Number: A159838
NPI: 1598015679
Ŭ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
Fax: (619) 825-9577
Ŭ After Hours Phone: (619) 515-2550
Ŭ Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Ŭ Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE
MAHDAI, SUZAN
Provider ID: 419139
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
ALIMONOS, LYSISTRATI
Provider ID: 419139
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
BUECHNER, CHARLENE
Provider ID: 419139
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA, SHARP MARY BIRCH VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
D2. 初級保健名錄

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

BUECHNER, CHARLENE
Provider ID: 419139
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CARTER, KHALIL
Provider ID: 419139
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CARTER, SANDRA
Provider ID: 419139
Provider Gender: Female
License Number: A118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

CERVANTES, SANDRA
Provider ID: 419139
Provider Gender: Female
License Number: A1118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

**OBSTETRICS / GYNECOLOGY**

**CERVANTES, SANDRA**

Provider ID: 419139  
Provider Gender: Female  
License Number: A118095  
NPI: 1073701041  
Provider English Spoken: Y  
Provider Language(s): Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital  
Board Certified Specialty: No  
7592 BROADWAY  
LEMON GROVE, CA 91945  
Phone: (619) 515-2550  
After Hours Phone: (619) 515-2550  
Website: N/A  
Email: valeriade@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 9:00AM-5:00PM

**CHAKRABARTI, PRIYA**

Provider ID: 419139  
Provider Gender: Female  
License Number: A163464  
NPI: 1326531401  
Provider English Spoken: Y  
Provider Language(s): Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital  
Board Certified Specialty: No  
7592 BROADWAY  
LEMON GROVE, CA 91945  
Phone: (619) 515-2550  
After Hours Phone: (619) 515-2550  
Website: N/A  
Email: valeriade@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 9:00AM-5:00PM

**DE MIK, TRAVIS**

Provider ID: 419139  
Provider Gender: Male  
License Number: A108228  
NPI: 1629277322  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
7592 BROADWAY  
LEMON GROVE, CA 91945  
Phone: (619) 515-2550  
After Hours Phone: (619) 515-2550  
Website: N/A  
Email: valeriade@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 9:00AM-5:00PM

**CHAKRABARTI, PRIYA**

Provider ID: 419139  
Provider Gender: Female  
License Number: A163464  
NPI: 1326531401  
Provider English Spoken: Y  
Provider Language(s): Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital  
Board Certified Specialty: No  
7592 BROADWAY  
LEMON GROVE, CA 91945  
Phone: (619) 515-2550  
After Hours Phone: (619) 515-2550  
Website: N/A  
Email: valeriade@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 9:00AM-5:00PM

**DE MIK, TRAVIS**

Provider ID: 419139  
Provider Gender: Male  
License Number: A108228  
NPI: 1629277322  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
7592 BROADWAY  
LEMON GROVE, CA 91945  
Phone: (619) 515-2550  
After Hours Phone: (619) 515-2550  
Website: N/A  
Email: valeriade@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 9:00AM-5:00PM
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

DORUELO, ASHLEY
Provider ID: 419139
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FOLCH TORRES-AGUIAR, BEATRIZ
Provider ID: 419139
Provider Gender: Female
License Number: A148014
NPI: 1457794752
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1186
D2. 初級保健名錄

HANLEY, LAUREN
Provider ID: 419139
Provider Gender: Female
License Number: C174771
NPI: 1053392035
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
Mercy Hospital, Sharp Grossmont Hospital
Board Certified Specialty: No
7592 Broadway
Lemon Grove, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
Accessibility: CONTACT PROVIDER

LIPSCHITZ, LISA
Provider ID: 419139
Provider Gender: Female
License Number: A72005
NPI: 1649208711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Sharp Coronado Hospital and Healthcare CTR, Scripps
Mercy Hospital, GROSSMONT HOSPITAL
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
D2. 初級保健名錄

American Sign Language (ASL):

俐 有

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
Provider ID: 419139
Provider Gender: Female
License Number: A116680
NPI: 1700073962

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

MELENDEZ BERRIOS, IARA DEL
Provider ID: 419139
Provider Gender: Female
License Number: A114181
NPI: 1740514249

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

LOEFFLER, ALLISON
Provider ID: 419139
Provider Gender: Female
License Number: A116680
NPI: 1700073962
| Name                | Provider ID | Gender   | License Number | NPI   | Hospital Affiliation | Board Certified Specialty | Address                  | Phone            | After Hours Phone | Website          | Email                  | Medi-Cal Open Panel | Min/Max Age | American Sign Language (ASL) | Accessibility | Hours          |
|---------------------|-------------|----------|----------------|-------|----------------------|---------------------------|--------------------------|----------------|-----------------|-------------------|-----------------------|---------------------|-------------|-----------------------------|-------------------|----------------|         |
| **RODRIGUEZ JEREZ, ROBERTO** | 419139      | Male     | A154298        | 1710316450 | SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL | No | 7592 BROADWAY LEMON GROVE, CA 91945 | (619) 515-2500 | (619) 515-2500 | N/A              | valeriade@fhcsd.org | Yes | 0-150 | N | CONTACT PROVIDER | M-F 8:30AM-5:30PM |
| **OBSTETRICS / GYNECOLOGY** |             |          |                |       |                      |                           |                          |                |                 |                   |                       |                     |             |                            |                   |                |
| **SAPRA, SONIA**    | 419139      | Female   | A164859        | 1952751711 | SCRIPPS MERCY HOSPITAL | No | 7592 BROADWAY LEMON GROVE, CA 91945 | (619) 515-2500 | (619) 515-2500 | N/A              | valeriade@fhcsd.org | Yes | 0-150 | N | CONTACT PROVIDER | M-F 8:30AM-5:30PM |
| **STABEN, REBECCA** | 419139      | Female   | 20A13958       | 1932269198 | SCRIPPS MERCY HOSPITAL | No | 7592 BROADWAY LEMON GROVE, CA 91945 | (619) 515-2500 | (619) 515-2500 | N/A              | valeriade@fhcsd.org | Yes | 0-150 | N | CONTACT PROVIDER | M-F 9:00AM-5:00PM |

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 419139
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

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

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 419139
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No

7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

CHULA VISTA
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN
Provider ID: 419139
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2500
After Hours Phone: (619) 515-2500
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
JACKSON, DANA
Provider ID: 419139
Provider Gender: Female
License Number: 20A14119
NPI: 1689060063
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation:
MARINHEALTH AND MARINHEALTH MEDICAL CENTER, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SLEIMAN, JOSEPH
Provider ID: 419139
Provider Gender: Male
License Number: A102060
NPI: 1093976748
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
D2. 初級保健名錄

PHYSICIANS ASSISTANT
FLEMING, DAVID
Provider ID: 419139
Provider Gender: Male
License Number: PA12416
NPI: 1932329505
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
GODDARD, SHANNON
Provider ID: 419139
Provider Gender: Female
License Number: PA56072
NPI: 1780961417
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
GODDARD, SHANNON
Provider ID: 419139
Provider Gender: Female
License Number: PA56072
NPI: 1780961417
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7592 BROADWAY
LEMON GROVE, CA 91945
Phone: (619) 515-2550
After Hours Phone: (619) 515-2550
Website: N/A
Email: valeriade@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 417102
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org

Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 418302
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No

2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org

Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

DHARKAR SURBER, SAPNA

Website: www.operationsamahan.org

Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

NATIONAL CITY

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 417102
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No

2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org

Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

AQUINO, FELINO
Provider ID: 418302
Provider Gender: Male
License Number: NP22974
NPI: 1356684781
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No

2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org

Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER

DHARKAR SURBER, SAPNA
D2. 初級保健名錄

Provider ID: 185270
Provider Gender: Female
License Number: NP95013257
NPI: 1538707765
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
LIM, IMELDA
Provider ID: 418302
Provider Gender: Female
License Number: NP95000203
NPI: 1093130395
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Cultural Competency: N
Board Certified Specialty: No

2101 GRANGER AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
LIM, IMELDA
Provider ID: 417102
Provider Gender: Female
License Number: NP95000203
NPI: 1093130395
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No

1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
LUM, YUIN-WAH
Provider ID: 418930
Provider Gender: Female
License Number: NP95010663
NPI: 1942764477
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
NEVAREZ, IRENE
Provider ID: 185270
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified Specialty: No

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 564-8765
After Hours Phone: (619) 564-8765
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
NEVAREZ, IRENE
Provider ID: 185270
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified Specialty: No
217 HIGHLAND AVE NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0|150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER
OCHOA, ERLINDA
Provider ID: 185270
Provider Gender: Female
License Number: NP4430
NPI: 1346437464
Provider English Spoken: Y
Medi-Cal Open Panel: Yes
Min/Max Age: 0|150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER
REAL, MARIA
Provider ID: 185270
Provider Gender: Female
License Number: NP17328
NPI: 1548450471
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
217 HIGHLAND AVE NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0|150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
D2. 初級保健名錄

NPI: 1548450471
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
- Board Certified Specialty: No
- 217 HIGHLAND AVE NATIONAL CITY, CA 91950
- Phone: (619) 434-7308
- After Hours Phone: (619) 434-7308
- Website: www.lamaestra.org
- Email: aschmaltz@lamaestra.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER
REID, EMILY
Provider ID: 185270
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 217 HIGHLAND AVE NATIONAL CITY, CA 91950
- Phone: (619) 434-7308
- After Hours Phone: (619) 434-7308
- Website: www.lamaestra.org
- Email: aschmaltz@lamaestra.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER
VERDUZCO GONZALEZ, AURORA
Provider ID: 185270
Provider Gender: Female
License Number: NP95001961
NPI: 1932452323
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 217 HIGHLAND AVE NATIONAL CITY, CA 91950
- Phone: (619) 434-7308
- After Hours Phone: (619) 434-7308
- Website: www.lamaestra.org
- Email: aschmaltz@lamaestra.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:30PM
CERTIFIED NURSE PRACTITIONER
VILLANUEVA DE GUTIE, BERENICE
Provider ID: 185270
Provider Gender: Female
License Number: NP95002188
NPI: 1952795536
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
217 HIGHLAND AVE NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org

CERTIFIED NURSE PRACTITIONER
WILLIAMS, BREAHNA
Provider ID: 185270
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
217 HIGHLAND AVE NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

FAMILY PRACTICE
ALGHAMDI, ASMA
Provider ID: 227418
Provider Gender: Female
License Number: A167529
NPI: 1316310840
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
ANDAYA, MIKHAEL
Provider ID: 418930
Provider Gender: Male
License Number: A176878
NPI: 1780189209
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
BAEZ, BEATRICE
Provider ID: 417102
Provider Gender: Female
License Number: A74777
NPI: 1245372507
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FAMILY PRACTICE
BAEZ, BEATRICE
Provider ID: 417102
Provider Gender: Female
License Number: A74777
NPI: 1245372507
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsmahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CAMPBELL, BRIANNA
Provider ID: 227418
Provider Gender: Female
License Number: A157488
NPI: 1316479892
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CANLAS, AVELINO
Provider ID: 417102
Provider Gender: Male
License Number: A74854
NPI: 1275682528
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation:PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsmahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CAMPBELL, BRIANNA
Provider ID: 227418
Provider Gender: Female
License Number: A157488
NPI: 1316479892
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CANLAS, AVELINO
Provider ID: 417102
Provider Gender: Male
License Number: A74854
NPI: 1275682528
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
D2. 初級保健名錄

Hospital Affiliation: PARADISE VALLEY HOSPITAL
Board Certified Specialty: No

FAMILY PRACTICE
CARRIEDO CENICEROS, MARIA
Provider ID: 227412
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

FAMILY PRACTICE
CEVALLOS, JAMES
Provider ID: 227412
Provider Gender: Male
License Number: A55469
NPI: 1720181829
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No

FAMILY PRACTICE
CARRIEDO CENICEROS, MARIA
Provider ID: 227412
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

FAMILY PRACTICE
CEVALLOS, JAMES
Provider ID: 227412
Provider Gender: Male
License Number: A55469
NPI: 1720181829
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N

Board Certified Specialty: No
D2. 初級保健名錄

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

DILLON, MAYRA
Provider ID: 227412
Provider Gender: Female
License Number: A112571
NPI: 1629232715
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinic
s/national- city- family- clinic- 1
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

MEDICAL PROVIDER

LANUZA, MARK
Provider ID: 418930
Provider Gender: Male
D2. 初級保健名錄

License Number: 20A18460  
NPI: 1992230593  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
1000 EUCLID AVE  
NATIONAL CITY, CA 91950  
Phone: (619) 515-2399  
After Hours Phone: (619) 515-2399  
Website: www.fhcsd.org  
Email: lucinaj@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M 8:30AM-3:30PM  
TU 10:30AM-5:30PM  
W 8:30AM-3:30PM  
TH 10:30AM-5:30PM  
F 8:30AM-3:30PM  

FAMILY PRACTICE  
LAW, KAREN  
Provider ID: 227418  
Provider Gender: Female  
License Number: A138534  
NPI: 1205253150  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: CHULA VISTA COMM HOSP  
Board Certified Specialty: No  
2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: syhealth.org/clinic  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  

FAMILY PRACTICE  
LEUTE, ERIC  
Provider ID: 227418  
Provider Gender: Male  
License Number: A80832  
NPI: 1720171507  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  

D2. 初級保健名錄

Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinic
s/paradise- hills- family- clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
LEUTE, ERIC
Provider ID: 227418
Provider Gender: Male
License Number: A80832
NPI: 1720171507
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Email: dinah.pierce@syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
MEDINA, ALEXANDER
Provider ID: 361428
Provider Gender: Male
License Number: A133539
NPI: 1467714436
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Email: dinah.pierce@syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
MOHAMEDI, NADIA
Provider ID: 227418
Provider Gender: Female
License Number: A146819
NPI: 1477947364
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinic
s/paradise- hills- family- clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

N

Provider ID: 227418
Provider Gender: Female
License Number: A146819
NPI: 1477947364

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

Provider ID: 227418
Provider Gender: Female
License Number: A113624
NPI: 1952563421

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No

Provider ID: 361428
Provider Gender: Male
License Number: 20A12653
NPI: 1508121674

Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Board Certified Specialty: No
D2. 初級保健名錄

Provider ID: 361428
Provider Gender: Male
License Number: 20A12653
NPI: 1508121674
Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
Email: dinah.pierce@syhealth.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
OCEGUEDA, JOSHUA
Provider ID: 227412
Provider Gender: Male
License Number: A165184
NPI: 1336643345
Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
RICHARDSON, DANIELLE
Provider ID: 227418
Provider Gender: Female
License Number: A127555
NPI: 1609142892
Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

s/paradise- hills- family- clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ROBERTS, POMAI
Provider ID: 227412
Provider Gender: Female
License Number: A103218
NPI: 1023278314
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
SCHUMAKER, EDWARD
Provider ID: 185270
Provider Gender: Male
License Number: 20A6433
NPI: 1184616872
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SNOOK, BRIAN
Provider ID: 227418
Provider Gender: Male
D2. 初級保健名錄

License Number: 20A11518
NPI: 1295977353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
2400 E 8TH ST STE A NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2806
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
STONES, RACHEL
Provider ID: 185270
Provider Gender: Female
License Number: A167184
NPI: 1720583040
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
217 HIGHLAND AVE NATIONAL CITY, CA 91950
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: TH 8:00AM-2:00PM

FAMILY PRACTICE
VELASQUEZ, SHARON
Provider ID: 227418
Provider Gender: Female
License Number: A71304
NPI: 1972732584
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
2400 E 8TH ST STE A NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinic
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
VELASQUEZ, SHARON
Provider ID: 227418
Provider Gender: Female
License Number: A71304
NPI: 1972732584
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
 Board Certified Specialty: No
 2400 E 8TH ST STE A
 NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 Fax: (619) 259-2807
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinics/paradise-hills-family-clinic
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FQHC
FAMILY HEALTH CTR SD
NATIONAL CITY,
Provider ID: 418930
NPI: 1417409228
 Provider English Spoken: Y
 Cultural Competency: N
 1000 EUCLID AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 Fax: (619) 269-0053
 After Hours Phone: (619) 515-2399
 Website: www.fhcsd.org
 Email: lucinaj@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-3:30PM
 TU 10:30AM-5:30PM
 W 8:30AM-3:30PM
 TH 10:30AM-5:30PM
 F 8:30AM-3:30PM

FQHC
LA MAESTRA FAMILY CLINIC INC,
Provider ID: 185270
NPI: 1336353721
 Provider English Spoken: Y
 Cultural Competency: N
 217 HIGHLAND AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 434-7308
 Fax: (619) 434-7310
 After Hours Phone: (619) 434-7308
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: TH 8:00AM-2:00PM

FQHC
LA MAESTRA FAMILY CLINIC INC,
Provider ID: 185270
NPI: 1336353721
 Provider English Spoken: Y
 Cultural Competency: N
D2. 初級保健名錄

FQHC
OPERATION SAMAHAN - NATIONAL C,
Provider ID: 417102
NPI: 1801907449
Provider English Spoken: Y
Cultural Competency: N
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
Fax: (619) 434-7310
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email:
aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: TH 8:00AM-2:00PM

FQHC
OPERATION SAMAHAN - NATIONAL C,
Provider ID: 417102
NPI: 1801907449
Provider English Spoken: Y
Cultural Competency: N
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 474-3919
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
OPERATION SAMAHAN - GRANGER SCHOOL BASED,
Provider ID: 418302
NPI: 1205134517
Provider English Spoken: Y
Cultural Competency: N
2743 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 474-3919
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
NATIONAL CITY,
Provider ID: 227412
NPI: 1003869363
Provider English Spoken: Y
Cultural Competency: N
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 474-3722
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinic
D2. 初級保健名錄

FQHC
SAN YSIDRO HEALTH
NATIONAL CITY,
Provider ID: 227412
NPI: 1003869363
Provider English Spoken: Y
Cultural Competency: N
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 474-3722
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinic
San Ysidro Health
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
PARADISE HILLS,
Provider ID: 227418
NPI: 1598907487
Provider English Spoken: Y
Cultural Competency: N
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinic
San Ysidro Health
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

SAN YSIDRO HEALTH SOUTH BAY,
Provider ID: 361428
NPI: 1851757215
Provider English Spoken: Y
Cultural Competency: N
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 434-3514
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
San Ysidro Health
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

SAN YSIDRO HEALTH SOUTH BAY,
Provider ID: 361428
NPI: 1851757215
Provider English Spoken: Y
Cultural Competency: N
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 434-3514
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
San Ysidro Health
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
PARADISE HILLS,
Provider ID: 227418
NPI: 1598907487
Provider English Spoken: Y
Cultural Competency: N
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
San Ysidro Health
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
PARADISE HILLS,
Provider ID: 227418
NPI: 1598907487
Provider English Spoken: Y
Cultural Competency: N
330 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
San Ysidro Health
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

HEPATOLOGY
GISH, ROBERT
Provider ID: 185270
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY COMM MED CTR
Board Certified Specialty: No
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: ashmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE
HEKMAT, RAZI
Provider ID: 78388
Provider Gender: Male
NPI: 1871501205
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Phone: (619) 267-8181
Fax: (619) 479-6750
After Hours Phone: (619) 267-8181
Website: N/A
Email: SIEAB@AOL.COM
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE
BRAVERMAN, IRA
Provider ID: 10635
Provider Gender: Male
NPI: 1124039755
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL
Board Certified Specialty: Yes
610 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Phone: (619) 267-8181
Fax: (619) 479-6750
After Hours Phone: (619) 267-8181
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

INTERNAL MEDICINE
## D2. 初級保健名錄

### LAMANTIA, MICHELE
- Provider ID: 227412
- Provider Gender: Female
- License Number: G71855
- NPI: 1124176102
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Board Certified Specialty: No
- 1136 D AVE
  - NATIONAL CITY, CA 91950
  - Phone: (619) 662-4100
  - After Hours Phone: (619) 662-4100
  - Website: syhealth.org/clinic
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

### INTERNAL MEDICINE

#### LAMANTIA, MICHELE
- Provider ID: 361428
- Provider Gender: Female
- License Number: G71855
- NPI: 1124176102
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Board Certified Specialty: No
- 330 E 8TH ST
  - NATIONAL CITY, CA 91950
  - Phone: (619) 662-4100
  - After Hours Phone: (619) 662-4100
  - Website: www.syhealth.org
  - Email: dinah.pierce@syhealth.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

### INTERNAL MEDICINE

#### ROUEL, WADI
- Provider ID: 185270
- Provider Gender: Male
- License Number: C55979
- NPI: 1740254713
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Arabic, Spanish, Syriac
  - Cultural Competency: N
  - Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
  - Board Certified Specialty: No
- 217 HIGHLAND AVE
  - NATIONAL CITY, CA 91950
  - Phone: (619) 434-7308
  - After Hours Phone: (619) 434-7308
  - Website: www.syhealth.org
  - Email: dinah.pierce@syhealth.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

---

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得
Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

INTERNAL MEDICINE
ROUEL, WADI
Provider ID: 185270
Provider Gender: Male
License Number: C55979
NPI: 1740254713
Provider English Spoken: Y
Provider Language(s): Arabic, Spanish, Syriac
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ASLIAN, AZITA
Provider ID: 227418
Provider Gender: Female
License Number: A118227
NPI: 1851667661
Provider English Spoken: Y
Provider Language(s): Fataleka
Cultural Competency: N
Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinics.html
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEUROLOGY
CANTU-REYNA, GUILLERMO
Provider ID: 185270
Provider Gender: Male
License Number: A41375
NPI: 1447389101
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 798-3977
After Hours Phone: (619) 798-3977
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEUROLOGY
CANTU-REYNA, GUILLERMO
Provider ID: 185270
Provider Gender: Male
License Number: A41375
NPI: 1447389101
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 798-3977
After Hours Phone: (619) 798-3977
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

nic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ASLIAN, AZITA
Provider ID: 227418
Provider Gender: Female
License Number: A118227
NPI: 1851667661
Provider English Spoken: Y
Provider Language(s) Spoken: Fataleka
Cultural Competency: N
Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center,
SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BAILONY, MOHAMMED
Provider ID: 30132
Provider Gender: Male
NPI: 1376625913
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS,
PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
655 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Phone: (619) 470-1945
Fax: (619) 475-5048
After Hours Phone: (619) 470-1945
Website: N/A
Email: BAILONY@YAHOO.COM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS
BAILONY, AHMAD
Provider ID: 146949
Provider Gender: Male
NPI: 1790914422
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS,
PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
655 EUCLID AVE STE 201
NATIONAL CITY, CA 91950
Phone: (619) 267-8601
Fax: (619) 267-2242
After Hours Phone: (619)
D2. 初級保健名錄

267-8601
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS
BONSU, BEMA
Provider ID: 227412
Provider Gender: Male
License Number: C55180
NPI: 1932106986
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSF Benioff Children's Hospital Oakland
Board Certified Specialty: No
1136 D Ave
National City, CA 91950
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/national-city-family-clinic-1

PEDIATRICS
CONE, STEPHANIE
Provider ID: 185270
Provider Gender: Female
License Number: A123929
NPI: 1437444858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista, Rady Children's Hospital San Diego
Board Certified Specialty: No
217 Highland Ave
National City, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
D2. 初級保健名錄

aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): 
 Accessibility: CONTACT PROVIDER

PEDIATRICS

DAY, CHRISTOPHER
Provider ID: 418930
Provider Gender: Male
License Number: A163862
NPI: 1184121253
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 1000 EUCLID AVE
 NATIONAL CITY, CA 91950
 Phone: (619) 515-2399
 After Hours Phone: (619) 515-2399
 Website: www(fhcsd.org
 Email: lucinaj@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): 
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-3:30PM
 TU 10:30AM-5:30PM
 W 8:30AM-3:30PM
 TH 10:30AM-5:30PM
 F 8:30AM-3:30PM

PEDIATRICS

FRESNO, BLANCA
Provider ID: 102433
Provider Gender: Female
NPI: 1346258787
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
 Cultural Competency: N
 Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP
 CHULA VISTA MED CTR
 Board Certified Specialty: No
 610 EUCLID AVE STE 302
 NATIONAL CITY, CA 91950
 Phone: (619) 527-7700
 Fax: (619) 527-3226
 After Hours Phone: (619) 527-7700
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): 
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

PEDIATRICS
RANA, DEBORAH
Provider ID: 227418
Provider Gender: Female
License Number: G88347
NPI: 1033191457
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL HOSPITAL ENCINITAS, CHULA VISTA COMM HOSP
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

HOSPITAL ENCINITAS, CHULA VISTA COMM HOSP
Board Certified Specialty: No
2400 E 8TH ST STE A
NATIONAL CITY, CA 91950
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/paradise-hills-family-clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
UY, CARMELITA
Provider ID: 424443
Provider Gender: Female
NPI: 1154431484
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RACY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950
 Phone: (619) 475-4575
Fax: (619) 475-4578
 After Hours Phone: (619) 475-4575
Website: N/A
Email: PEDIATRICSINPARADISE@YAHOO.COM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-5:00PM

PEDIATRICS
VALENCIA, MARILES
Provider ID: 104060
Provider Gender: Female
NPI: 1275541625
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, RACY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
655 EUCLID AVE STE 207
NATIONAL CITY, CA 91950
 Phone: (619) 475-4575
Fax: (619) 475-4578
 After Hours Phone: (619) 475-4575
Website: N/A
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

ARMENTA, JORGE
Provider ID: 185270
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

PHYSICIANS ASSISTANT
BANGS, SASHA
Provider ID: 418930
Provider Gender: Female
License Number: PA55660
NPI: 1720524374
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

1000 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 515-2399
After Hours Phone: (619) 515-2399
Website: www.fhcsd.org
Email: lucinaj@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
MARTINEZ MURGUIA, IRENE
Provider ID: 185270
Provider Gender: Female
License Number: PA20296
NPI: 1447492889
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

217 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 434-7308
After Hours Phone: (619) 434-7308
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>Provider English Spoken</th>
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<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Website</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
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</tr>
</thead>
<tbody>
<tr>
<td>MERCER, KELLY</td>
<td>185270</td>
<td>Female</td>
<td>PA21625</td>
<td>1154609790</td>
<td>Y</td>
<td>Arabic</td>
<td>N</td>
<td>No</td>
<td>217 HIGHLAND AVE NATIONAL CITY, CA 91950</td>
<td>(619) 434-7308</td>
<td>(619) 434-7308</td>
<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
<td>Yes</td>
<td>0\150</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:30PM</td>
</tr>
</tbody>
</table>

### CERTIFIED NURSE PRACTITIONER

<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>Provider English Spoken</th>
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<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Website</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Accessibility</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>BAEK, KILHYO</td>
<td>206341</td>
<td>Female</td>
<td>NP95003571</td>
<td>1053776914</td>
<td>Y</td>
<td>Arabic</td>
<td>N</td>
<td>No</td>
<td>4700 N RIVER RD OCEANSIDE, CA 92057</td>
<td>(760) 631-5000</td>
<td>(760) 631-5000</td>
<td><a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
</tr>
</tbody>
</table>
D2. 初級保健名錄

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
BAEK, KILHYO
Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
BAEK, KILHYO
Provider ID: 206341
Provider Gender: Female
License Number: NP95003571
NPI: 1053776914
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
BROMAN, GRETCHEN
Provider ID: 402436
Provider Gender: Female
License Number: NP95007885
NPI: 1922421288
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
517 N HORSE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
BROMAN, GRETCHEN
Provider ID: 402436
Provider Gender: Female
License Number: NP95007885
NPI: 1922421288
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 402434
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
D2. 初級保健名錄

PRACTITIONER
HALGEDAHL, YI
Provider ID: 402436
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 402436
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
D2. 初級保健名錄

Cultural Competency: N
Board Certified Specialty: No

517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 402434
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (844) 308-5003
After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
D2. 初級保健名錄

N

Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (844) 308-5003
After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
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4700 N RIVER RD
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Phone: (844) 308-5003
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American Sign Language (ASL): N
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SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
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Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
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4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (844) 308-5003
After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
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CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 206341
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
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4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (844) 308-5003
After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE
DONNELL, MARTI
Provider ID: 206341
Provider Gender: Female
License Number: C50708
NPI: 1235151366
FAMILY PRACTICE DONNELL, MARTI
Provider ID: 206341
Provider Gender: Female
License Number: C50708
NPI: 1235151366
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
4700 N RIVER RD OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE DONNELL, MARTI
Provider ID: 206341
Provider Gender: Female
License Number: C50708
NPI: 1235151366
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
4700 N RIVER RD OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
D2. 初級保健名錄

MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FAMILY PRACTICE
DONNELL, MARTI
Provider ID: 206341
Provider Gender: Female
License Number: C50708
NPI: 1235151366
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
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American Sign Language (ASL): N
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FAMILY PRACTICE
FATLAND, SARAH
Provider ID: 206341
Provider Gender: Female
License Number: 20A18374
NPI: 1831354026
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Cultural Competency: N
Board Certified Specialty: No
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OCEANSIDE, CA 92057
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
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**FAMILY PRACTICE**

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<td>After Hours Phone: (760) 631-5000</td>
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**FAMILY PRACTICE**

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<td>Provider Gender: Male</td>
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<td>4700 N RIVER RD</td>
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<td>OCEANSIDE, CA 92057</td>
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<td>Phone: (760) 631-5000</td>
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**FAMILY PRACTICE**

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**FAMILY PRACTICE**

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<td>Provider ID: 206341</td>
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<td>NPI: 1235492760</td>
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<td>Min/Max Age: 0\999</td>
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D2. 初級保健名錄

PANICKER, CIBU
Provider ID: 206341
Provider Gender: Male
License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PANICKER, CIBU
Provider ID: 206341
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License Number: A149340
NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
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American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
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NPI: 1235492760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
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OCEANSIDE, CA 92057
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After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PONSFORD, DIANA
Provider ID: 402436
Provider Gender: Female
License Number: 20A17371
NPI: 1407204969
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

SA 9:00AM-4:00PM

**FAMILY PRACTICE**
**PONSFORD, DIANA**
Provider ID: 402436  
Provider Gender: Female  
License Number: 20A17371  
NPI: 1407204969
 PROVIDER
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR  
Board Certified Specialty: No  
517 N HORNE ST  
OCEANSIDE, CA 92054  
Phone: (760) 631-5000  
After Hours Phone: (760) 631-5000
 PROVIDER
 Website: www.vistacomunityclinic.org  
Email: credentialing@vcc.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 PROVIDER
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
SA 9:00AM-4:00PM

**FAMILY PRACTICE**
**VIDAL, MONICA**
Provider ID: 206341  
Provider Gender: Female  
License Number: 20A8949  
NPI: 1871791749
 PROVIDER
 Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
4700 N RIVER RD  
OCEANSIDE, CA 92057  
Phone: (760) 631-5000  
After Hours Phone: (760) 631-5000
 PROVIDER
 Website: www.vistacomunityclinic.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 PROVIDER
 Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
SA 9:00AM-4:00PM
FAMILY PRACTICE
VIDAL, MONICA
Provider ID: 206341
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

FAMILY PRACTICE
VIDAL, MONICA
Provider ID: 206341
Provider Gender: Female
License Number: 20A8949
NPI: 1871791749
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

FQHC
TRUECARE,
D2. 初級保健名錄

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<tr>
<td>2210 MESA DR STE 300 OCEANSIDE, CA 92054</td>
<td></td>
</tr>
<tr>
<td>☎ Phone: (760) 757-5841 Fax: (760) 736-8740</td>
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**FQHC**

**VISTA COMMUNITY CLINIC, Provider ID: 206341 NPI: 1851300123**

| ❐ Provider English Spoken: Y Cultural Competency: N |
| 🌐 Phone: (760) 631-5000 Fax: (760) 414-3892 |
| ☎ After Hours Phone: (760) 631-5000 |
| 🌐 Website: www.vistacommunityclinic.org Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N |
| 💡 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM |

**FQHC**

**VISTA COMMUNITY CLINIC, Provider ID: 206341 NPI: 1316501562**

| ❐ Provider English Spoken: Y Cultural Competency: N |
| 🌐 Phone: (760) 631-5000 Fax: (760) 414-3892 |
| ☎ After Hours Phone: (760) 631-5000 |
| 🌐 Website: www.vistacommunityclinic.org Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N |
| 💡 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM |

**FQHC**

**VISTA COMMUNITY CLINIC, Provider ID: 206341 NPI: 1649662719**

| ❐ Provider English Spoken: Y Cultural Competency: N |
| 🌐 Phone: (760) 631-5000 Fax: (760) 414-3892 |
| ☎ After Hours Phone: (760) 631-5000 |
| 🌐 Website: www.vistacommunityclinic.org Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N |
| 💡 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM |

**FQHC**

**VISTA COMMUNITY CLINIC, Provider ID: 206341 NPI: 1316501562**

| ❐ Provider English Spoken: Y Cultural Competency: N |
| 🌐 Phone: (760) 631-5000 Fax: (760) 414-3892 |
| ☎ After Hours Phone: (760) 631-5000 |
| 🌐 Website: www.vistacommunityclinic.org Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N |
| 💡 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM |

**FQHC**

**VISTA COMMUNITY CLINIC, Provider ID: 206341 NPI: 1316501562**

| ❐ Provider English Spoken: Y Cultural Competency: N |
| 🌐 Phone: (760) 631-5000 Fax: (760) 414-3892 |
| ☎ After Hours Phone: (760) 631-5000 |
| 🌐 Website: www.vistacommunityclinic.org Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N |
| 💡 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM SA 9:00AM-4:00PM |

1232
D2. 初級保健名錄

Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC
VISTA COMMUNITY CLINIC,
Provider ID: 206341
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC
VISTA COMMUNITY CLINIC
HORNE STREET,
Provider ID: 402436
NPI: 1609094036
Provider English Spoken: Y
Cultural Competency: N
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC
VISTA COMMUNITY CLINIC
HORNE STREET,
Provider ID: 402436
NPI: 1609094036
Provider English Spoken: Y
Cultural Competency: N
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC
VISTA COMMUNITY CLINIC
HORNE STREET,
Provider ID: 402436
NPI: 1609094036
Provider English Spoken: Y
Cultural Competency: N
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC
VISTA COMMUNITY CLINIC
PIER VIEW WAY,
Provider ID: 402434
NPI: 1629357355
Provider English Spoken: Y
Cultural Competency: N
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

FQHC
VISTA COMMUNITY CLINIC
PIER VIEW WAY,
Provider ID: 402434
NPI: 1629357355
Provider English Spoken: Y
Cultural Competency: N
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
W 8:00AM-7:00PM
TH-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
GENERAL PRACTICE
RONAN, KEVIN
Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
RONAN, KEVIN
Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
RONAN, KEVIN
Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
Address: 4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CALHOUN, CHANELLE
Provider ID: 480247
Provider Gender: Female
License Number: G75390
NPI: 1437166709
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
Address: 2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 891-4667
After Hours Phone: (760) 891-4667
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
RONAN, KEVIN
Provider ID: 206341
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
Address: 4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CALHOUN, CHANELLE
Provider ID: 480247
Provider Gender: Female
License Number: G75390
NPI: 1437166709
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
Address: 2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 891-4667
After Hours Phone: (760) 891-4667
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1236
D2. 初級保健名錄

License Number: G75390
NPI: 1437166709
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS

Board Certified Specialty: No
2210 MESA DR STE 300 OCEANSIDE, CA 92054
Phone: (760) 891-4667
After Hours Phone: (760) 891-4667
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CALHOUN, CHANELLE
Provider ID: 344145
Provider Gender: Female
NPI: 1437166709
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
2210 MESA DR STE 300 OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CHEN, MING
Provider ID: 614195
Provider Gender: Female
NPI: 1851525505
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Portuguese, Spanish, Taiwanese
Cultural Competency: N
Hospital Affiliation: Adventist Health Delano
Board Certified Specialty: No
2210 MESA DR STE 300 OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CURLEY, EDWARD
Provider ID: 240736
Provider Gender: Male
NPI: 1164434312
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
2210 MESA DR STE 300 OCEANSIDE, CA 92054

PEDIATRICS
CHEN, MING
Provider ID: 614195
Provider Gender: Female
NPI: 1851525505
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Portuguese, Spanish, Taiwanese
Cultural Competency: N
Hospital Affiliation: Adventist Health Delano
Board Certified Specialty: No
2210 MESA DR STE 300 OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CURLEY, EDWARD
Provider ID: 240736
Provider Gender: Male
NPI: 1164434312
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
2210 MESA DR STE 300 OCEANSIDE, CA 92054

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM
D2. 初級保健名錄

Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS
CURLEY, EDWARD
Provider ID: 480247
Provider Gender: Male
License Number: A73814
NPI: 1164434312
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS
CURLEY, EDWARD
Provider ID: 480247
Provider Gender: Male
License Number: A73814
NPI: 1164434312
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM

PEDIATRICS
CURLEY, EDWARD
Provider ID: 480247
Provider Gender: Male
License Number: A73814
NPI: 1164434312
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No

2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-4:30PM
D2. 初級保健名錄

PEDIATRICS

DANIELS, SARAH
Provider ID: 433806
Provider Gender: Female
NPI: 1730446527
.Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, Rady
CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

GUNTA, SUJANA
Provider ID: 402434
Provider Gender: Female
License Number: A109056
NPI: 1932304342
.Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: Rady
CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

PEDIATRICS

GUNTA, SUJANA
Provider ID: 402434
Provider Gender: Female
License Number: A109056
NPI: 1932304342
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Marathi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR
Board Certified Specialty: No
3605 VISTA WAY BLDG B
OCEANSIDE, CA 92056
Phone: (760) 547-1010
Fax: (760) 547-1011
After Hours Phone: (760) 547-1010
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

KRAMER, MELISSA
Provider ID: 469759
Provider Gender: Female
NPI: 1467833467
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
3605 VISTA WAY BLDG B
OCEANSIDE, CA 92054
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

MACINTYRE, ELIZABETH
Provider ID: 543354
Provider Gender: Female
NPI: 1336520766
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3605 VISTA WAY BLDG B
STE 130
OCEANSIDE, CA 92056
Phone: (760) 547-1010
Fax: (760) 547-1011
After Hours Phone: (760) 547-1010
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY
Provider ID: 206341
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3731
After Hours Phone: (760) 631-5000
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

MCCAMMACK, BRADLEY
Provider ID: 206341
Provider Gender: Male
License Number: A130883
NPI: 1629368857
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
D2. 初級保健名錄

PROVIDER

PEDIATRICS

MILLER, DONALD
Provider ID: 433589
Provider Gender: Male
NPI: 1154356582

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, Rady CHILDRENS HOSPITAL SAN DIEGO, PAOMAR MEDICAL CENTER, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL
- Board Certified Specialty: No

- 3605 VISTA WAY BLDG B STE 130 OCEANSIDE, CA 92056
- Phone: (760) 547-1010
- After Hours Phone: (760) 547-1010
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM SA 8:00AM-4:30PM

PEDIATRICS

PERKINS, RACHEL
Provider ID: 435952
Provider Gender: Female
NPI: 1427398320

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, Rady CHILDREN'S HOSPITAL SAN DIEGO
- Board Certified Specialty: No

- 3605 VISTA WAY STE 130 BLDG B OCEANSIDE, CA 92056
- Phone: (760) 547-1010
- After Hours Phone: (760) 547-1010
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY
Provider ID: 480247
Provider Gender: Male
License Number: PA22667
NPI: 1174964001

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: GROSSMONT HOSPITAL
- Board Certified Specialty: No

- 2210 MESA DR STE 300 OCEANSIDE, CA 92054
- Phone: (760) 966-3306
- After Hours Phone: (760) 966-3306
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT

CHISWICK, GARY
Provider ID: 480247
<table>
<thead>
<tr>
<th>Provider</th>
<th>Name</th>
<th>ID</th>
<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>English Spoken</th>
<th>Cultural Competency</th>
<th>Hospital Affiliation</th>
<th>Board Certified Specialty</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Web Site</th>
<th>Accessibility</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>CHISWICK, GARY</td>
<td>480247</td>
<td>Male</td>
<td>PA22667</td>
<td>1174964001</td>
<td>Y</td>
<td>N</td>
<td>GROSSMONT HOSPITAL</td>
<td>No</td>
<td>0\150</td>
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<td>RUSSO, KRISTA</td>
<td>480247</td>
<td>Female</td>
<td>PA53036</td>
<td>1922471192</td>
<td>Y</td>
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<td>No</td>
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您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。

如欲线上获得精神健康服务提供者清单，请造访blueshieldca.com/fad。
D2. 初級保健名錄

PAUMA VALLEY

FQHC
NEIGHBORHOOD HEALTHCARE PAUMA VALLEY,
Provider ID: 206267
NPI: 1407031693

Provider English Spoken: Y
Cultural Competency: N
16650 HIGHWAY 76
PAUMA VALLEY, CA 92061
Phone: (760) 742-9919
Fax: (858) 633-4696
After Hours Phone: (760) 742-9919
Website: www.ihpsocal.org
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

POWAY

FAMILY PRACTICE
KAUR, JATINDER
Provider ID: 481187
Provider Gender: Female
License Number: A120771
NPI: 1912141391

Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified Specialty: No
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: N/A
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
KAUR, JATINDER
Provider ID: 481187
Provider Gender: Female
License Number: A120771
NPI: 1912141391

Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Board Certified Specialty: No
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: N/A
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
NEIGHBORHOOD
HEALTHCARE GOLD FAMILY HEALTH CENTER,
Provider ID: 481187
NPI: 1023518768
Provider English Spoken: Y
Cultural Competency: N
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742
After Hours Phone: (858) 218-3000
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE
CAPARSO, AMANDA
Provider ID: 602426
Provider Gender: Female
NPI: 1003046004
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (360) 462-2742
After Hours Phone: (858) 218-3000
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE
WINE, DAVID
Provider ID: 612886
Provider Gender: Male
NPI: 1811985542
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3100
Fax: (858) 487-4736
After Hours Phone: (858) 675-3100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
CURET, ZULMA
Provider ID: 481187
Provider Gender: Female
License Number: A119661
NPI: 1841561107
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO
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<td>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RACY CHILDREN'S HOSPITAL SAN DIEGO</td>
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D2. 初級保健名錄

- Accessibility: CONTACT PROVIDER
  Hours: SU-SA 8:00AM-5:00PM

**PEDIATRICS**

**MORTIMER, DORI**
Provider ID: 230552
Provider Gender: Female
NPI: 1417928417
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RODY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, PALOMAR HEALTH
Board Certified Specialty: No
15725 POMERADO RD STE 203
POWAY, CA 92064
Phone: (858) 673-3340
After Hours Phone: (858) 673-3340
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

**RENDLER, NATHAN**
Provider ID: 30205
Provider Gender: Male
NPI: 1275531337
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew, Spanish, Yiddish
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RODY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH
Board Certified Specialty: No
15525 POMERADO RD STE B1
POWAY, CA 92064
Phone: (858) 487-8333
Fax: (858) 487-0856
After Hours Phone: (858) 484-4003
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

**RAMGREN, AILEEN**
Provider ID: 397707
Provider Gender: Female
NPI: 1356785505
Provider English Spoken: Y
Cultural Competency: N
15725 POMERADO RD STE 203
POWAY, CA 92064
Phone: (858) 673-3340
After Hours Phone: (858) 673-3340
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

**TAI, KUANGKAI**
Provider ID: 351834
Provider Gender: Male
NPI: 1396744066
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, RODY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
15525 POMERADO RD STE B1
POWAY, CA 92064
Phone: (858) 487-8333
Fax: (858) 487-0856
After Hours Phone: (858) 484-4003
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
SA 9:00AM-5:00PM

**PHYSICIANS ASSISTANT**

**BALDWIN, DONNA**
D2. 初級保健名錄

Provider ID: 481187
Provider Gender: Female
License Number: PA23310
NPI: 1649692369
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM

RAMONA

CERTIFIED NURSE PRACTITIONER
DOAN, CHINH
Provider ID: 449438
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No

220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC TRUECARE,
Provider ID: 449438
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PHYSICIANS ASSISTANT BALDWIN, DONNA
Provider ID: 481187
Provider Gender: Female
License Number: PA23310
NPI: 1649692369
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
After Hours Phone: (858) 218-3000
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC TRUECARE,
Provider ID: 449438
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM
D2. 初級保健名錄

INTERNAL MEDICINE
YUNG, DORIS
Provider ID: 449438
Provider Gender: Female
License Number: A89893
NPI: 1730386863
Provider English Spoken: Y
Provider Language(s):
Spoken: Chinese, Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
CHISWICK, GARY
Provider ID: 449438
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified Specialty: No
220 ROTANZI ST
RAMONA, CA 92065
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
REIFENBERGER, JODY
Provider ID: 449438
Provider Gender: Female
License Number: PA22669
D2. 初級保健名錄

NPI: 1386741072
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 220 ROTANZI ST
  - RAMONA, CA 92065
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
REIFENBERGER, JODY
Provider ID: 449438
- Provider Gender: Female
- License Number: PA22669
- NPI: 1386741072
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 220 ROTANZI ST
  - RAMONA, CA 92065
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  - After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
RUSSO, KRISTA
Provider ID: 449438
- Provider Gender: Female
- License Number: PA53036
- NPI: 1922471192
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 220 ROTANZI ST
  - RAMONA, CA 92065
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

ZANGEN, ROCHELLE
Provider ID: 449438
- Provider Gender: Female
- License Number: PA51494
- NPI: 1447681150
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 220 ROTANZI ST
  - RAMONA, CA 92065
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
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- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
RUSSO, KRISTA
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- Provider Gender: Female
- License Number: PA53036
- NPI: 1922471192
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
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  - After Hours Phone: (760) 736-6767
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- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

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ZANGEN, ROCHELLE
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- License Number: PA51494
- NPI: 1447681150
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
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  - RAMONA, CA 92065
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

SAN DIEGO

CARDIOVASCULAR DISEASE
GARIBYAN, VARTAN
Provider ID: 417937
Provider Gender: Male
License Number: 20A12504
NPI: 1790084143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
ALVAREZ, LISA
Provider ID: 206363
Provider Gender: Female
License Number: NP19911
NPI: 1417262718
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
AQUINO, FELINO
Provider ID: 432308
Provider Gender: Male
License Number: 20A12504
NPI: 1790084143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
AQUINO, FELINO
Provider ID: 432308
Provider Gender: Male
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
AQUINO, FELINO
Provider ID: 432308
Provider Gender: Male
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
AQUINO, FELINO
Provider ID: 432308
Provider Gender: Male
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
AQUINO, FELINO
Provider ID: 432308
Provider Gender: Male
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
AQUINO, FELINO
Provider ID: 432308
Provider Gender: Male

D2. 初級保健名錄

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<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Website</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Cultural Competency</th>
<th>Board Certification</th>
<th>Specialty</th>
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<tr>
<td>AQUINO, FELINO</td>
<td>432308</td>
<td>Male</td>
<td>NP22974</td>
<td>1356684781</td>
<td>Y</td>
<td>(844) 200-2426</td>
<td></td>
<td><a href="http://www.operationsamahan.org">www.operationsamahan.org</a></td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
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<td>No</td>
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<tr>
<td>ARTS, SERENA</td>
<td>403583</td>
<td>Female</td>
<td>NP10769</td>
<td>1801881552</td>
<td>Y</td>
<td>(619) 233-8500</td>
<td></td>
<td>N/A</td>
<td>No</td>
<td>0\150</td>
<td>N</td>
<td>N</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
D2. 初級保健名錄

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

CERTIFIED NURSE PRACTITIONER
ARTS, SERENA
Provider ID: 403583
Provider Gender: Female
License Number: NPI0769
NPI: 1801881552
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
BELEN, NEZER
Provider ID: 206363
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
BELEN, NEZER
Provider ID: 206363
Provider Gender: Male
License Number: NP95009292
NPI: 1386120723
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
BELTRON, KIMBERLY
Provider ID: 403583
Provider Gender: Female
License Number: NP95020497
NPI: 1871295493
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 1501 IMPERIAL AVE
 SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER
BELTRON, KIMBERLY
Provider ID: 403583
Provider Gender: Female
License Number: NP95020497
NPI: 1871295493
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:30PM

1253
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
BESTERFELDT, LYDIA
Provider ID: 482070
Provider Gender: Female
License Number: NP95013060
NPI: 1265929442
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
BURNS, DELLA
Provider ID: 233597
Provider Gender: Female
License Number: NP7413
NPI: 1871577023
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
 Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
CELESTIN-RAMSEY, AKANKE
Provider ID: 451167
Provider Gender: Female
License Number: NP8563
NPI: 1447450275
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
950 S EUCLID AVE
SAN DIEGO, CA 92114
 Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
 Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N

D2. 初級保健名錄

- **Accessibility:** CONTACT PROVIDER
  - **Hours:** M-F 8:00AM-5:00PM
  - **SA:** 8:00AM-4:00PM

**CERTIFIED NURSE PRACTITIONER**

**CELESTIN-RAMSEY, AKANKE**

- **Provider ID:** 451167
- **Provider Gender:** Female
- **License Number:** NP8563
- **NPI:** 1447450275
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MEMORIAL HOSPITAL
- **Board Certified Specialty:** No
- **Address:** 1809 NATIONAL AVE
  - **Phone:** (619) 515-2300
  - **After Hours Phone:** (619) 515-2300
- **Website:** www.syhealth.org/clinics/king-chavez-health-center
- **Medi-Cal Open Panel:** Yes

**CHASE, AVA LOU**

- **Provider ID:** 206360
- **Provider Gender:** Female
- **License Number:** NP95000602
- **NPI:** 1164496386
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Address:** 1809 NATIONAL AVE
  - **Phone:** (619) 515-2300
  - **After Hours Phone:** (619) 515-2300
- **Website:** www.fhcsd.org
- **Email:** dalvarado@fhcsd.org
- **Medi-Cal Open Panel:** Yes
  - **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N

**DHARKAR SURBER, SAPNA**

- **Provider ID:** 185268
- **Provider Gender:** Female
- **License Number:** NP95013257
- **NPI:** 1538707765
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
- **Board Certified Specialty:** No
- **Address:** 4060 FAIRMOUNT AVE
  - **Phone:** (619) 255-9155
  - **After Hours Phone:** (619) 255-9155
- **Website:** www.lamaestra.org
- **Email:** aschmaltz@lamaestra.org
- **Medi-Cal Open Panel:** Yes
  - **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
**D2. 初級保健名錄**

- **NPI:** 1538707765
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
  - Board Certified Specialty: No
  - 4060 FAIRMOUNT AVE
    - Phone: (619) 255-9155
    - After Hours Phone: (619) 255-9155
  - Website: www.lamaestra.org
  - Email: aschmaltz@lamaestra.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:00AM-6:00PM
  - SA 8:00AM-2:00PM

- **CERTIFIED NURSE PRACTITIONER**
  - **DO, ELAINE**
    - Provider ID: 233532
    - Provider Gender: Female
    - License Number: NP95019446
    - NPI: 1215696307
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Hospital Affiliation: Rady Childrens Hospital San Diego
    - Board Certified Specialty: No
    - 4305 UNIVERSITY AVE STE 150
      - Phone: (619) 280-2058
      - After Hours Phone: (619) 280-2058
    - Website: www.sdfamilycare.org
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\22
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-F 8:00AM-5:00PM
      - SA 8:00AM-2:00PM

- **CERTIFIED NURSE PRACTITIONER**
  - **GARCIA, JOHNNY**
    - Provider ID: 206363
    - Provider Gender: Male
    - License Number: NP95007000
    - NPI: 1932622156
    - Provider English Spoken: Y
    - Provider Language(s) Spoken: Spanish
    - Cultural Competency: N
    - Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
    - Board Certified Specialty: No
    - 4725 MARKET ST
      - Phone: (619) 515-2560
      - After Hours Phone: (619) 515-2560
    - Website: www.fhcsd.org
    - Email: nancyl@fhcsd.org
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\150
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER

- **CERTIFIED NURSE PRACTITIONER**
  - **GARCIA, JOHNNY**
    - Provider ID: 206363
    - Provider Gender: Male
    - License Number: NP95007000
    - NPI: 1932622156
    - Provider English Spoken: Y
    - Provider Language(s) Spoken: Spanish
    - Cultural Competency: N
    - Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
    - Board Certified Specialty: No
    - 4305 UNIVERSITY AVE STE 150
      - Phone: (619) 280-2058
      - After Hours Phone: (619) 280-2058
    - Website: www.sdfamilycare.org
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\22
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER

- **CERTIFIED NURSE PRACTITIONER**
  - **DO, ELAINE**
    - Provider ID: 233532
    - Provider Gender: Female
    - License Number: NP95019446
    - NPI: 1215696307
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Hospital Affiliation: Rady Childrens Hospital San Diego
    - Board Certified Specialty: No
    - 4305 UNIVERSITY AVE STE 150
      - Phone: (619) 280-2058
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    - Website: www.sdfamilycare.org
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\22
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER

- **CERTIFIED NURSE PRACTITIONER**
  - **GARCIA, JOHNNY**
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    - NPI: 1932622156
    - Provider English Spoken: Y
    - Provider Language(s) Spoken: Spanish
    - Cultural Competency: N
    - Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
    - Board Certified Specialty: No
    - 4305 UNIVERSITY AVE STE 150
      - Phone: (619) 280-2058
      - After Hours Phone: (619) 280-2058
    - Website: www.sdfamilycare.org
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\22
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
GOLDFINGER, SARAH
Provider ID: 206360
Provider Gender: Female
License Number: NP95011313
NPI: 1134686744
 Provider English Spoken: Г
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
HA, THU
Provider ID: 482070
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
 Provider English Spoken: Г
Provider Language(s): Vietnamese
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
GOLDFINGER, SARAH
Provider ID: 206046
Provider Gender: Female
License Number: NP95011313
NPI: 1134686744
 Provider English Spoken: Г
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
HA, THU
Provider ID: 206046
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
 Provider English Spoken: Г
Provider Language(s): Vietnamese
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
HA, THU
Provider ID: 206046
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
 Provider English Spoken: Г
Provider Language(s): Vietnamese
Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

1257
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
HA, THU
Provider ID: 206046
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
Provider English Spoken: Y
Provider Language(s): Vietnamese
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
HA, THU
Provider ID: 482070
Provider Gender: Female
License Number: NP95010517
NPI: 1346443983
Provider English Spoken: Y
Provider Language(s): Vietnamese
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
HARRINGTON, BARBARA LORRAINE
Provider ID: 185268
Provider Gender: Female
License Number: NP17008
NPI: 1659579134
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER
HARRINGTON, BARBARA LORRAINE
D2. 初級保健名錄

 Provider ID: 185268
 Provider Gender: Female
 License Number: NP17008
 NPI: 1659579134
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4060 FAIRMOUNT AVE
 SAN DIEGO, CA 92105
 Phone: (619) 255-9155
 After Hours Phone: (619) 255-9155
 Website: www.lamaestra.org
 Email: aschmaltz@lamaestra.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

 CERTIFIED NURSE
 PRACTITIONER
 HETTIG, JUDITH
 Provider ID: 402851
 Provider Gender: Female
 License Number: NP3439
 NPI: 1396815866
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

 CERTIFIED NURSE
 PRACTITIONER
 HILL, GENIELYN
 Provider ID: 417101
 Provider Gender: Female
 License Number: NP95020046
 NPI: 1710632435
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-4:30PM

 CERTIFIED NURSE
 PRACTITIONER
 HETTIG, JUDITH
 Provider ID: 402851
 Provider Gender: Female
 License Number: NP3439
 NPI: 1396815866
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 3705 MISSION BLVD
 SAN DIEGO, CA 92109
 Phone: (619) 515-2444
 After Hours Phone: (619) 515-2444
 Website: www.fhcsd.org
 Email: sabay@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

 CERTIFIED NURSE
 PRACTITIONER
 HILL, GENIELYN
 Provider ID: 417101
 Provider Gender: Female
 License Number: NP95020046
 NPI: 1710632435
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
 Cultural Competency: N
 Board Certified Specialty: No
 10737 CAMINO RUIZ STE 235
 SAN DIEGO, CA 92126
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
 Medi-Cal Open Panel: Yes
D2. 初級保健名錄

Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER
HILLIARD, THESALONICA
Provider ID: 417101
Provider Gender: Female
License Number: NP95010585
NPI: 1861956724
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER
HOANG, CHI
Provider ID: 482070
Provider Gender: Female
License Number: NP95004600
NPI: 1902350994
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
HOGAN, ROSELYNN JOY
Provider ID: 206360
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
HOGAN, ROSELYNN JOY
Provider ID: 206360
Provider Gender: Female
License Number: NP17852
NPI: 1205019510
/provider/English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INSTONE, SUSAN
Provider ID: 233532
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
/provider/English Spoken: Y
Provider Language(s): Spanish
Hospital Affiliation: RACY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
HORNEY, KRISTAN
Provider ID: 403583
Provider Gender: Female
License Number: NP95007712
NPI: 1720590904
/provider/English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER
HORNEY, KRISTAN
Provider ID: 403583
Provider Gender: Female
License Number: NP95007712
NPI: 1720590904
/provider/English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER
INSTONE, SUSAN
Provider ID: 233532
Provider Gender: Female
License Number: NP4858
NPI: 1710223268
/provider/English Spoken: Y
Provider Language(s): Spanish
Hospital Affiliation: RACY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:00AM-2:00PM
D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Board Certified Specialty: No

4305 University Ave STE 150
San Diego, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
INSTONE, SUSAN
Provider ID: 482070
Provider Gender: Female
License Number: NP4858
NPI: 1710223268

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Board Certified Specialty: No

7011 Linda Vista Rd
San Diego, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
JOHNSON, SHAWNA AKIKO
Provider ID: 233597
Provider Gender: Female
License Number: NP95002518
NPI: 1922237809

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

4290 Polk Ave
San Diego, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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JOHNSON, SHAWNA AKIKO
Provider ID: 233597
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License Number: NP95002518
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Cultural Competency: N
Board Certified Specialty: No

4290 Polk Ave
San Diego, CA 92105
Phone: (619) 563-0250
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Website: www.sdfamilycare.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
KEMP, KATHRINE
Provider ID: 403583
Provider Gender: Female
License Number: NP95018497
NPI: 1316615313
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER
KHAN, MATTHEW
Provider ID: 417987
Provider Gender: Male
License Number: NP17838
NPI: 1942456124
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER
KI, TRISH
Provider ID: 206046
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare
D2. 初級保健名錄

.Provider ID: 482070
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
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Provider ID: 482070
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Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
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After Hours Phone: (858) 810-8700
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 8:30AM-5:30PM

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blueshieldca.com/faf
D2. 初級保健名錄

Provider ID: 482070
Provider Gender: Female
License Number: NP23847
NPI: 1376840199
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER
KLOBERDANZ, KELSEY
Provider ID: 417937
Provider Gender: Female
License Number: NP95005293
NPI: 1235672502
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
LENNON, RYAN
Provider ID: 624977
Provider Gender: Female
License Number: NP95027593
NPI: 1558084855
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
After Hours Phone: (619) 515-2355
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
LIEBER, CAROL
Provider ID: 517403
Provider Gender: Female
License Number: NP20849
1265
D2. 初级保健名录

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<td>316 25TH ST</td>
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<tr>
<td>Phone: (619) 238-5551</td>
<td>Phone: (844) 200-2426</td>
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<td>After Hours Phone: (619) 238-5551</td>
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CERTIFIED NURSE PRACTITIONER

LOVE, VICKI
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Provider Gender: Female
License Number: NP17362
NPI: 1699759134
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
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Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

LU, TAMMY
Provider ID: 206360
Provider Gender: Female
License Number: NP95007253
NPI: 1457879132
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

MARTIN, RIA
Provider ID: 206363
Provider Gender: Female
License Number: NP95005321
NPI: 1437695079
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1267
CERTIFIED NURSE PRACTITIONER
MARTINEZ, CAROLYN
Provider ID: 214492
Provider Gender: Female
License Number: NP22031
NPI: 1609101997
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM

CERTIFIED NURSE PRACTITIONER
MELTZER, VIRGINIA
Provider ID: 233532
Provider Gender: Female
License Number: NP95015948
NPI: 1821684390
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER
MARTINEZ, CAROLYN
Provider ID: 214492
Provider Gender: Female
License Number: NP22031
NPI: 1609101997
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

**PRACTITIONER**

**MENDOZA, GRETEL MARIE**

Provider ID: 417101
Provider Gender: Female
License Number: NP95002233
NPI: 1245652387

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

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126

Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

**CERTIFIED NURSE**

**PRACTITIONER**

**NEVAREZ, IRENE**

Provider ID: 185268
Provider Gender: Female
License Number: NP95009891
NPI: 1003166646

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

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105

Phone: (619) 564-8765
After Hours Phone: (619) 564-8765
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0-150

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

**PRACTITIONER**

**NOCEDA, ANA**

Provider ID: 233532
Provider Gender: Female
License Number: NP19505
NPI: 1386971760

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

1269
D2. 初級保健名錄

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Tagalog
- **Cultural Competency:** N
- **Hospital Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO
- **Board Certified Specialty:** No

**Hospital Address:**
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

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

**Website:** www.sdfamilycare.org

**Medi-Cal Open Panel:** Yes
**Min/Max Age:** 0\22

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

**Hours:**
M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

---

**CERTIFIED NURSE PRACTITIONER**
**NOCEDA, ANA**

- **Provider ID:** 482070
- **Provider Gender:** Female
- **License Number:** NP19505
- **NPI:** 1386971760

**Hospital Address:**
7011 LINDA VISTA RD
SAN DIEGO, CA 92111

**Phone:** (858) 810-8700
**After Hours Phone:** (858) 810-8700

**Website:** www.sdfamilycare.org

**Medi-Cal Open Panel:** Yes
**Min/Max Age:** 0\150

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

**Hours:**
M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

---

**CERTIFIED NURSE PRACTITIONER**
**NOCEDA, ANA**

- **Provider ID:** 233532
- **Provider Gender:** Female
- **License Number:** NP19505
- **NPI:** 1386971760

**Hospital Address:**
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105

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

**Website:** www.sdfamilycare.org

**Medi-Cal Open Panel:** Yes
**Min/Max Age:** 0\22

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

**Hours:**
M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM
D2. 初級保健名錄

OCAMPO, ELAINE
Provider ID: 482070
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Yue Chinese
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
OCAMPO, ELAINE
Provider ID: 206046
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Yue Chinese
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
OCAMPO, ELAINE
Provider ID: 206046
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Yue Chinese
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

### CERTIFIED NURSE PRACTITIONER
**OCAMPO, ELAINE**
Provider ID: 482070
Provider Gender: Female
License Number: NP95003427
NPI: 1063856805
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Mandarin, Yue Chinese
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **7011 LINDA VISTA RD**
  SAN DIEGO, CA 92111
- **Phone:** (858) 810-8700
- **After Hours Phone:** (858) 810-8700
- **Website:** www.sdfamilycare.org
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

### CERTIFIED NURSE PRACTITIONER
**ODA, THAGHAR**
Provider ID: 206363
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Amharic, Arabic
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **1809 NATIONAL AVE**
  SAN DIEGO, CA 92113
- **Phone:** (619) 515-2300
- **After Hours Phone:** (619) 515-2300
- **Website:** www.fhcsd.org
- **Email:** dalvarado@fhcsd.org
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

### CERTIFIED NURSE PRACTITIONER
**ODA, THAGHAR**
Provider ID: 206363
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Amharic, Arabic
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **1809 NATIONAL AVE**
  SAN DIEGO, CA 92113
- **Phone:** (619) 515-2300
- **After Hours Phone:** (619) 515-2300
- **Website:** www.fhcsd.org
- **Email:** nancyl@fhcsd.org
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

### CERTIFIED NURSE PRACTITIONER
**ODA, THAGHAR**
Provider ID: 206363
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Amharic, Arabic
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **4725 MARKET ST**
  SAN DIEGO, CA 92102
- **Phone:** (619) 515-2560
- **After Hours Phone:** (619) 515-2560
- **Website:** www.fhcsd.org
- **Email:** nancyl@fhcsd.org
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

### CERTIFIED NURSE PRACTITIONER
**ODA, THAGHAR**
Provider ID: 206363
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Amharic, Arabic
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **4725 MARKET ST**
  SAN DIEGO, CA 92102
- **Phone:** (619) 515-2560
- **After Hours Phone:** (619) 515-2560
- **Website:** www.fhcsd.org
- **Email:** nancyl@fhcsd.org
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
D2. 初級保健名錄

SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
ODA, THAGHAR
Provider ID: 206360
Provider Gender: Female
License Number: NP95000205
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
ODA, THAGHAR
Provider ID: 206360
Provider Gender: Female
License Number: RN810863
NPI: 1063835692
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
ORPILLA, IMELDA
Provider ID: 418535
Provider Gender: Female
License Number: NP95003211
NPI: 1790785988
Provider English Spoken: Y
Provider Language(s) Spoken: Amharic, Arabic
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

- Provider Language(s)
  - Spoken: Tagalog
  - Cultural Competency: N
- Board Certified Specialty: No
- 9995 CARMEL MOUNTAIN RD STE B10 AND B11
  - SAN DIEGO, CA 92129
  - Phone: (844) 200-2426
  - After Hours Phone: (844) 200-2426
  - Website: www.operationsamahan.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0 \( \leq \) 150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

ORPILLA, IMELDA
- Provider ID: 417101
- Provider Gender: Female
- License Number: NP95003211
- NPI: 1790785988
- Provider English Spoken: Y
- Provider Language(s)
  - Spoken: Tagalog
- Cultural Competency: N
- Board Certified Specialty: No
- 10737 CAMINO RUIZ STE 235
  - SAN DIEGO, CA 92126
  - Phone: (844) 200-2426
  - After Hours Phone: (844) 200-2426
  - Website: www.operationsamahan.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0 \( \leq \) 150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:00AM-4:30PM

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
- Provider ID: 206363
- Provider Gender: Female
- License Number: NP95001492
- NPI: 1073869145
- Provider English Spoken: Y
- Provider Language(s)
  - Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 4725 MARKET ST
  - SAN DIEGO, CA 92102
  - Phone: (619) 515-2560
  - After Hours Phone: (619) 515-2560
  - Email: nancyl@fhcsd.org
  - Website: www.fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0 \( \leq \) 150
  - American Sign Language (ASL): N

- Provider Language(s)
  - Spoken: Tagalog
  - Cultural Competency: N
- Board Certified Specialty: No
- 9995 CARMEL MOUNTAIN RD STE B10 AND B11
  - SAN DIEGO, CA 92129
  - Phone: (844) 200-2426
  - After Hours Phone: (844) 200-2426
  - Website: www.operationsamahan.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0 \( \leq \) 150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER

OWEN, MICHAEL
Provider ID: 206363
Provider Gender: Female
License Number: NP95001492
NPI: 1073869145
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE
Provider ID: 403583
Provider Gender: Female
License Number: NP95020636
NPI: 1356083828
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PATIAG, DANIEL
Provider ID: 206046
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

CERTIFIED NURSE PRACTITIONER

PADILLA, MICHELE
Provider ID: 482070
Provider Gender: Male
License Number: NP95020636
NPI: 1356083828
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

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D2. 初級保健名錄

Min/Max Age: 0\150
American Sign Language (ASL): N
إمكانية: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
PATIAG, DANIEL
Provider ID: 206046
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
使用权: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER
PATIAG, DANIEL
Provider ID: 206046
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
使用权: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
QUINTO, CINDY
Provider ID: 482070
Provider Gender: Male
License Number: NP95012511
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
使用权: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。

如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
D2. 初級保健名錄

Provider ID: 482070
Provider Gender: Female
License Number: NP16433
NPI: 1902810377
- Provider English Spoken: Y
- Provider Language(s) Spoken: French, Lao, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
QUINTO, CINDY
Provider ID: 233532
Provider Gender: Female
License Number: NP16433
NPI: 1902810377
- Provider English Spoken: Y
- Provider Language(s) Spoken: French, Lao, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM
D2. 初級保健名錄

REID, EMILY
Provider ID: 185268
Provider Gender: Female
License Number: NP95002766
NPI: 1083081467
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
ROGERS, TANYA
Provider ID: 417987
Provider Gender: Female
License Number: NP95004443
NPI: 1558710038
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
SABIN, NANCY
Provider ID: 206046
Provider Gender: Female
License Number: NP4668
NPI: 1285732586
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1278
D2. 初級保健名錄

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**

Provider ID: 482070  
Provider Gender: Female  
License Number: NP4668  
NPI: 1285732586

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

Cultural Competency: N  
Board Certified Specialty: No  
9
d 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 279-0925  
After Hours Phone: (858) 279-0925  
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER  
Hours: M 8:00AM-5:00PM  
TU 8:00AM-8:00PM  
W-F 8:00AM-5:00PM  
SA 9:00AM-1:00PM

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**

Provider ID: 482070  
Provider Gender: Female  
License Number: NP4668  
NPI: 1285732586

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

Cultural Competency: N  
Board Certified Specialty: No  
7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 810-8700  
After Hours Phone: (858) 810-8700  
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER  
Hours: M 8:30AM-5:30PM  
TU 8:30AM-9:00PM  
W-F 8:30AM-5:30PM  
SA 9:00AM-4:00PM

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**

Provider ID: 206046  
Provider Gender: Female  
License Number: NP4668  
NPI: 1285732586

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

Cultural Competency: N  
Board Certified Specialty: No  
6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 279-0925  
After Hours Phone: (858) 279-0925  
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER  
Hours: M 8:00AM-5:00PM  
TU 8:00AM-8:00PM  
W-F 8:00AM-5:00PM  
SA 9:00AM-1:00PM

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**

Provider ID: 206046  
Provider Gender: Female  
License Number: NP4668  
NPI: 1285732586

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

Cultural Competency: N  
Board Certified Specialty: No  
6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 279-0925  
After Hours Phone: (858) 279-0925  
Website: www.sdfamilycare.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER  
Hours: M 8:00AM-5:00PM  
TU 8:00AM-8:00PM  
W-F 8:00AM-5:00PM  
SA 9:00AM-1:00PM

**CERTIFIED NURSE PRACTITIONER**

**SABIN, NANCY**
D2. 初級保健名錄

Provider ID: 206046
Provider Gender: Female
License Number: NP4668
NPI: 1285732586

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 6973 LINDA VISTA RD
- SAN DIEGO, CA 92111
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M 8:00AM-5:00PM
- TU 8:00AM-8:00PM
- W-F 8:00AM-5:00PM
- SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER
SANTANGELO, JOANNE
Provider ID: 206046
Provider Gender: Female
License Number: NP2390
NPI: 1619370475

- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 6973 LINDA VISTA RD
- SAN DIEGO, CA 92111
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M 8:00AM-5:00PM
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- W-F 8:00AM-5:00PM
- SA 9:00AM-1:00PM

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SANTANGELO, JOANNE
Provider ID: 206046
Provider Gender: Female
License Number: NP2390
NPI: 1619370475

- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 7011 LINDA VISTA RD
- SAN DIEGO, CA 92111
- Phone: (858) 810-8700
- After Hours Phone: (858) 810-8700
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
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SANTANGELO, JOANNE
Provider ID: 206046
Provider Gender: Female
License Number: NP2390
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- Board Certified Specialty: No
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- SAN DIEGO, CA 92111
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- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M 8:30AM-5:30PM
- TU 8:30AM-9:00PM
- W-F 8:30AM-5:30PM
- SA 9:00AM-4:00PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
CERTIFIED NURSE PRACTITIONER
SANTANGELO, JOANNE
Provider ID: 206046
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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SAN DIEGO, CA 92111
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After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER
SATTERWHITE, MAURINE
Provider ID: 206046
Provider Gender: Female
License Number: NP2390
NPI: 1619370475
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
SATTERWHITE, MAURINE
Provider ID: 482070
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 8:00AM-8:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

CERTIFIED NURSE PRACTITIONER
SATTERWHITE, MAURINE
Provider ID: 482070
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
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SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

CERTIFIED NURSE PRACTITIONER
SATTERWHITE, MAURINE
Provider ID: 206046
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

CERTIFIED NURSE PRACTITIONER
SATTERWHITE, MAURINE
Provider ID: 482070
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

CERTIFIED NURSE PRACTITIONER
SATTERWHITE, MAURINE
Provider ID: 206046
Provider Gender: Female
License Number: NP7022
NPI: 1225012842
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

坎普博士的医生集团可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可以直接联系该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad.org
D2. 初級保健名錄

**PRACTITIONER**

**SAVILLE, EDITH**  
Provider ID: 417937  
Provider Gender: Female  
License Number: NP7374  
NPI: 1730567678  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
4094 4TH AVE  
SAN DIEGO, CA 92103  
Phone: (619) 515-2545  
After Hours Phone: (619) 515-2545  
Website: www.fhcsd.org  
Email: fabianm@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-TH 8:00AM-9:00PM  
F 8:00AM-5:00PM

**CERTIFIED NURSE PRACTITIONER**

**SEAMAN, MARY**  
Provider ID: 206363  
Provider Gender: Female  
License Number: NP10146  
NPI: 1033116652  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
4725 MARKET ST  
SAN DIEGO, CA 92102  
Phone: (619) 515-2560  
After Hours Phone: (619) 515-2560  
Website: www.fhcsd.org  
Email: nancyl@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**SAVILLE, EDITH**  
Provider ID: 417937  
Provider Gender: Female  
License Number: NP7374  
NPI: 1730567678  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
4094 4TH AVE  
SAN DIEGO, CA 92103  
Phone: (619) 515-2545  
After Hours Phone: (619) 515-2545  
Website: www.fhcsd.org  
Email: fabianm@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**SEBRING, JAN**  
Provider ID: 206360  
Provider Gender: Female  
License Number: NP10906  
NPI: 1295750339  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300  
Website: www.fhcsd.org  
Email: dalvarado@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PRACTITIONER
SEBRING, JAN
Provider ID: 206360
Provider Gender: Female
License Number: RN486421
NPI: 1295750339
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
SEBRING, JAN
Provider ID: 206360
Provider Gender: Female
License Number: NP10906
NPI: 1295750339
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
SEBRING, JAN
Provider ID: 206360
Provider Gender: Female
License Number: RN486421
NPI: 1295750339
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
TAYLOR, KAYLA
Provider ID: 206362
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
TAYLOR, KAYLA
Provider ID: 206362
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
TAYLOR, KAYLA
Provider ID: 206362
Provider Gender: Female
License Number: NP95006792
NPI: 1730604414
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
TODD, MIKAYLA
Provider ID: 517998
Provider Gender: Female
License Number: NP95005999
D2. 初級保健名錄

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<th>PROVIDER</th>
<th>CERTIFIED NURSE PRACTITIONER</th>
<th>TRAN, KELLY</th>
<th>Provider ID: 206360</th>
<th>Provider Gender: Female</th>
<th>License Number: NP95003689</th>
<th>NPI: 1255799276</th>
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<td>Provider English Spoken: Y</td>
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<td>Cultural Competency: N</td>
<td>Board Certified Specialty: No</td>
<td>4690 EL CAJON BLVD SAN DIEGO, CA 92115</td>
<td>Phone: (619) 662-4100</td>
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<td>After Hours Phone: (619) 662-4100</td>
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<td>Provider English Spoken: Y</td>
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<td>1809 NATIONAL AVE SAN DIEGO, CA 92113</td>
<td>Phone: (619) 515-2300</td>
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<td>After Hours Phone: (619) 515-2300</td>
<td>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a> Email: <a href="mailto:dalvarado@fhcsd.org">dalvarado@fhcsd.org</a></td>
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<th>TUEROS, VICTORIA</th>
<th>Provider ID: 206360</th>
<th>Provider Gender: Female</th>
<th>License Number: NP2286</th>
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<td>1809 NATIONAL AVE SAN DIEGO, CA 92113</td>
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<td>After Hours Phone: (619) 515-2300</td>
<td>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a> Email: <a href="mailto:dalvarado@fhcsd.org">dalvarado@fhcsd.org</a></td>
<td>Medi-Cal Open Panel: Yes</td>
<td>Min/Max Age: 0\150</td>
<td>American Sign Language (ASL): N</td>
<td>Accessibility: CONTACT PROVIDER</td>
</tr>
</tbody>
</table>
D2. 初級保健名錄

Provider ID: 206360
Provider Gender: Female
License Number: NP2286
NPI: 1598989261

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
VEGA, TERESA
Provider ID: 206360
Provider Gender: Female
License Number: NP95001705
NPI: 1912304569

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
VELASQUEZ, FERNANDO
Provider ID: 206360
Provider Gender: Male
License Number: NP95011254
NPI: 1386195535

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

**CERTIFIED NURSE PRACTITIONER**

**VELASQUEZ, FERNANDO**  
Provider ID: 419529  
Provider Gender: Male  
License Number: NP95011254  
NPI: 1386195535  
¬ Provider English Spoken: Y  
¬ Provider Language(s)  
  Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  

2325 COMMERCIAL ST STE 1400  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2422  
 After Hours Phone: (619) 515-2422  
 Website: www.fhcsd.org  
 Email: dalvarado@fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\150  
 American Sign Language (ASL): N  
 ¬ Accessibility: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**VELASQUEZ, FERNANDO**  
Provider ID: 356145  
Provider Gender: Male  
License Number: NP95011254  
NPI: 1386195535  
¬ Provider English Spoken: Y  
¬ Provider Language(s)  
  Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  

2391 ISLAND AVE  
SAN DIEGO, CA 92102  
 Phone: (619) 515-2435  
 After Hours Phone: (619) 515-2435  
 Website: N/A  
 Email: dalvarado@fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\150  
 American Sign Language (ASL): N  
 ¬ Accessibility: CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**VILLALOBOS, REBECA**  
Provider ID: 206360  
Provider Gender: Female  
License Number: NP95015780  
NPI: 1184224396  
¬ Provider English Spoken: Y  
¬ Provider Language(s)  
  Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619) 515-2300
D2. 初級保健名錄

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
VILLALOBOS, REBECA
Provider ID: 206360
Provider Gender: Female
License Number: NP95015780
NPI: 1184224396
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER
WEICKERT, MARIA
Provider ID: 417429
Provider Gender: Female
License Number: NP95010814
NPI: 1841758984
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

CERTIFIED NURSE PRACTITIONER
WILLIAMS, BREAHNA
Provider ID: 185268
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92101
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

CERTIFIED NURSE PRACTITIONER
WILLIAMS, BREAHNA
Provider ID: 185268
Provider Gender: Female
License Number: NP95001840
NPI: 1063884864
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
WILLIAMS, TAKISHA
Provider ID: 416831
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
WILLIAMS, TAKISHA
Provider ID: 402851
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
WOLF, CELIA
Provider ID: 417937
Provider Gender: Female
License Number: NP95001899
NPI: 1245635564
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE
BOSTON, LAURA
Provider ID: 206360
Provider Gender: Female
License Number: NM792
NPI: 1174553259
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE
GEPSTHEIN, YANA
Provider ID: 402851
Provider Gender: Female
License Number: NM1662
NPI: 1396956512
Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

GEPZSCHTEIN, YANA
Provider ID: 402851
Provider Gender: Female
License Number: NM1662
NPI: 1396956512

Provider English Spoken: Y
Provider Language(s) Spoken: Hebrew
Cultural Competency: N
Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

ASSADIAN, MEBRAK
Provider ID: 451167
Provider Gender: Female
License Number: DC27523
NPI: 1295278281

Provider English Spoken: Y
Provider Language(s) Spoken: Turkish
Cultural Competency: N
Board Certified Specialty: No

950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

CABALLERO, JAMES
Provider ID: 417101
Provider Gender: Male
License Number: DC27726
NPI: 1093991549

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

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-4:30PM
D2. 初級保健名錄

CHIROPRACTOR
CABALLERO, JAMES
Provider ID: 418535
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR
CABALLERO, JAMES
Provider ID: 418535
Provider Gender: Male
License Number: DC27726
NPI: 1093991549
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CHIROPRACTOR
ILCHENA, ALESDANDRA
Provider ID: 185268
Provider Gender: Female
License Number: DC32800
NPI: 1871046664

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 798-3947
After Hours Phone: (619) 798-3947
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CHIROPRACTOR
KAZEM, AHMAD
Provider ID: 227409
Provider Gender: Male
License Number: DC33300
NPI: 1003296096

Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
D2. 初級保健名錄

Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR
KAZEM, AHMAD
Provider ID: 227409
Provider Gender: Male
License Number: DC33300
NPI: 1003296096
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CHIROPRACTOR
LOVERN, JENNIFER
Provider ID: 207382
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
 Provider English Spoken: Y
 Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CHIROPRACTOR
LOVERN, JENNIFER
Provider ID: 207382
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
 Provider English Spoken: Y
 Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No
2630 1ST AVE
SAN DIEGO, CA 92103
 Phone: (619) 234-2158
 After Hours Phone: (619) 234-2158
 Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

CHIROPRACTOR
LOVERN, JENNIFER
Provider ID: 418535
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
 Provider English Spoken: Y
 Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
 Phone: (844) 200-2426
 After Hours Phone: (844) 200-2426
 Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

CHIROPRACTOR
LOVERN, JENNIFER
Provider ID: 418535
Provider Gender: Female
License Number: DC29074
NPI: 1235469396
 Provider English Spoken: Y
 Provider Language(s) Spoken: Italian, Spanish
Cultural Competency: N
Board Certified Specialty: No

D2. 初級保健名錄

CHIROPRACTOR
OLSEN, MARTIN
Provider ID: 402851
Provider Gender: Male
License Number: DC20729
NPI: 1730247990
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR
PAGE, BIANCA
Provider ID: 417937
Provider Gender: Female
License Number: DC33688
NPI: 1649787607
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR
ROJAS, RICHARD
Provider ID: 417937
Provider Gender: Male
License Number: DC31024
NPI: 1538318811
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID
Provider ID: 417937
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

CHIROPRACTOR

SOSA, DAVID
Provider ID: 206363
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR

SOSA, DAVID
Provider ID: 206363
Provider Gender: Male
License Number: DC33150
NPI: 1013308675
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
SU, VENNES
Provider ID: 417101
Provider Gender: Female
License Number: DC34907
NPI: 1053919928
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (644) 200-2426
After Hours Phone: (644) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

CLINIC OUTPATIENT
OPERATION SAMAHAN
RANCHO PENASQUITOS,
Provider ID: 418535
NPI: 1699216622
Provider English Spoken: Y
Cultural Competency: N
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

DERMATOLOGY
BURROWS, WILLIAM
Provider ID: 417937
Provider Gender: Male
License Number: G16236
NPI: 1639199292
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS
D2. 初級保健名錄

MERCY HOSPITAL
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DERMATOLOGY
BURROWS, WILLIAM
Provider ID: 417937
Provider Gender: Male
License Number: G16236
NPI: 1639199292
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DERMATOLOGY
CARTER, NATASHA
Provider ID: 206363
Provider Gender: Female
License Number: A140912
NPI: 1033539184
Provider English Spoken: Y
Provider Language(s):
Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY
METABOLISM DIABETES
AHMAD, AAKIF
Provider ID: 206360
Provider Gender: Male
License Number: 20A12732
NPI: 1720308331
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
ENDOCRINOLOGY METABOLISM DIABETES
AHMAD, AAKIF
Provider ID: 206360
Provider Gender: Male
License Number: 20A12732
NPI: 1720308331
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM

ENDOCRINOLOGY METABOLISM DIABETES
CARRILLO, MARITZA
Provider ID: 206360
Provider Gender: Female
License Number: A163183
NPI: 1649628587
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES
CHANG, AMY
Provider ID: 206360
Provider Gender: Female
License Number: A93385
NPI: 1750568911
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES
CARRILLO, MARITZA
Provider ID: 206360
Provider Gender: Female
License Number: A163183
NPI: 1649628587
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES
CHANG, AMY
Provider ID: 206360
Provider Gender: Female
License Number: A93385
NPI: 1750568911
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
| Provider ID   | Gender       | License Number | NPI      | Hospital Affiliation | Board Certified Specialty | Phone          | Fax           | After Hours Phone | Website                           | Email               | Medi-Cal Open Panel | Min/Max Age | American Sign Language (ASL) | Accessibility | Cultural Competency | Provider Language(s) Spoken | Provider English Spoken | Language |
|--------------|--------------|----------------|---------|----------------------|---------------------------|-------------------------|---------------|------------------|------------------|-----------------------------|---------------------|----------------------|-------------|--------------------------|-----------------------|----------------------|-----------------------------|------------------------|---------|
| 206360       | Male         | A178494        | 1821651779 | SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL | No                          | (619) 515-2300 | (619) 515-2500 | (619) 515-2300 | www.fhcsd.org                      | dalvarado@fhcsd.org | Yes                   | 0\150       | N                         | CONTACT PROVIDER              | N                    | Spanish                          | Y                     |                     |
| 206360       | Male         | A77126         | 1801994231 | SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR | No                          | (619) 515-2300 | (619) 515-2500 | (619) 515-2300 | www.fhcsd.org                      | dalvarado@fhcsd.org | Yes                   | 0\150       | N                         | CONTACT PROVIDER              | N                    | Spanish                          | Y                     |                     |
| 206360       | Male         | A77126         | 1801994231 | SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR | No                          | (619) 515-2300 | (619) 515-2500 | (619) 515-2300 | www.fhcsd.org                      | dalvarado@fhcsd.org | Yes                   | 0\150       | N                         | CONTACT PROVIDER              | N                    | Spanish                          | Y                     |                     |
MEMORIAL HOSPITAL, UCSD
MEDICAL CTR
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY
METABOLISM DIABETES
NAGELBERG, JODI
Provider ID: 206360
Provider Gender: Female
License Number: A146838
NPI: 1720474141
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY
METABOLISM DIABETES
RODRIGUEZ MARTINEZ, RENIL
Provider ID: 206360
Provider Gender: Female
License Number: A142703
NPI: 1477817757
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ABDALLAH, ALI
Provider ID: 206363
Provider Gender: Male
License Number: 20A15471
NPI: 1649699968
Provider English Spoken: Y
Provider Language(s)
D2. 初級保健名錄

Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ALVAREZ-ESTRADA, MIGUEL
Provider ID: 227409
Provider Gender: Male
License Number: A157505
NPI: 1588197826

Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
  Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No

3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
BACHARACH, REBECCA
Provider ID: 417937
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643

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

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE
BACHARACH, REBECCA
Provider ID: 417937
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
BAGINGITO, AUSTIN
Provider ID: 417429
Provider Gender: Male
License Number: A163977
NPI: 1942705637
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
BAHRAMZI, MARIA
Provider ID: 206362
Provider Gender: Female
License Number: A173486
NPI: 1588141865
Provider English Spoken: Y
Provider Language(s) Spoken: Pushto
Cultural Competency: N
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
PROVIDER

FAMILY PRACTICE

BAHRAHMZI, MARIA
Provider ID: 417987
Provider Gender: Female
License Number: A173486
NPI: 1588141865
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Pushto
  Cultural Competency: N
- Board Certified Specialty: No
- 4874 POLK AVE
  SAN DIEGO, CA 92105
  Phone: (619) 515-2426
  After Hours Phone: (619) 515-2426
- Website: www.fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAIN, NATALIE
Provider ID: 206360
Provider Gender: Female
License Number: A183464
NPI: 1821677584
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish
  Cultural Competency: N
- Board Certified Specialty: No
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
  Phone: (619) 515-2300
  After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
  Email: dalvarado@fhcsd.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

BAUTISTA, LUIS
Provider ID: 517403
Provider Gender: Male
License Number: A97270
NPI: 1295712206
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish
  Cultural Competency: N
  Hospital Affiliation:
    COMMUNITY REGIONAL MEDICAL CENTER-FRESNO,
    ST AGNES MEDICAL CENTER
- Board Certified Specialty: No
- 316 25TH ST
  SAN DIEGO, CA 92102
  Phone: (619) 238-5551
  After Hours Phone: (619) 238-5551
  Website: N/A
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\120
  American Sign Language (ASL): N
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**
**BAUTISTA, LUIS**
Provider ID: 517403
Provider Gender: Male
License Number: A97270
NPI: 1295712206
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, ST AGNES MEDICAL CENTER
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 645-6405
After Hours Phone: (619) 645-6405
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

**FAMILY PRACTICE**
**BISHOP, MELISSA**
Provider ID: 403583
Provider Gender: Female
License Number: C137521
NPI: 1578667077
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 238-5551
After Hours Phone: (619) 238-5551
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

**FAMILY PRACTICE**
**BODIFORD, SAMANTHA**
Provider ID: 214492
Provider Gender: Female
License Number: A165398
NPI: 1730684200
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM
D2. 初級保健名錄

429-3733
Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:00PM
TU-TH 8:30AM-8:00PM
F 8:30AM-5:00PM

FAMILY PRACTICE
BORTNER, ADAM
Provider ID: 206363
Provider Gender: Male
License Number: A164879
NPI: 1811491749
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
BRADY, PATRICIA
Provider ID: 403583
Provider Gender: Female
License Number: C53121
NPI: 1952390437
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
BRODSKY, MARK
Provider ID: 402851
Provider Gender: Male
License Number: C53623
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

FAMILY PRACTICE
BRADY, PATRICIA
Provider ID: 403583
Provider Gender: Female
License Number: C53121
NPI: 1952390437
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
BORTNER, ADAM
Provider ID: 206363
D2. 初級保健名錄

NPI: 1346337904
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 3705 MISSION BLVD
  SAN DIEGO, CA 92109
- Phone: (619) 515-2444
- After Hours Phone: (619) 515-2444
- Website: www.fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-W 8:30AM-5:30PM
  TH 9:00AM-6:00PM
  F 8:30AM-5:30PM

FAMILY PRACTICE
BURTON, LUCAS
Provider ID: 206362
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 3544 30TH ST
  SAN DIEGO, CA 92104
- Phone: (619) 515-2424
- After Hours Phone: (619) 515-2424
- Website: www.fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
BURTON, LUCAS
Provider ID: 206362
Provider Gender: Male
License Number: 20A20786
NPI: 1376171520
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 3544 30TH ST
  SAN DIEGO, CA 92104
- Phone: (619) 515-2424
- After Hours Phone: (619) 515-2424
- Website: www.fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
CAMPBELL, BRIANNA
Provider ID: 451167
Provider Gender: Female
License Number: A157488
NPI: 1316479892
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: CHULA VISTA COMM HOSP
- Board Certified Specialty: No
- 950 S EUCLID AVE
  SAN DIEGO, CA 92114
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org/clinics/king-chavez-health-center
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
D2. 初級保健名錄

CAMPBELL, BRIANNA
Provider ID: 451167
Provider Gender: Female
License Number: A157488
NPI: 1316479892
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
Address: 950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CARRIEDO CENICEROS, MARIA
Provider ID: 227409
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provided Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Address: 3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CARSON, COREY
Provider ID: 417937
Provider Gender: Female
License Number: A136616
NPI: 1245599778
Provider English Spoken: Y
Provided Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
Address: 4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

FAMILY PRACTICE
CARSON, COREY
Provider ID: 206360
Provider Gender: Female
License Number: A136616
NPI: 1245599778
/provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
 MEDICAL CTR
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
โทรศัพท์: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CHOU, BILL
Provider ID: 206362
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
/provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
โทรศัพท์: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CHOU, BILL
Provider ID: 417937
Provider Gender: Male
License Number: 20A14794
NPI: 1730448101
/provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
โทรศัพท์: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

- **CHUN, HYUN**
  - Provider ID: 206360
  - Provider Gender: Male
  - License Number: A163978
  - NPI: 1083118988
  - Provider English Spoken: Y
  - Provider Language(s): Korean
  - Cultural Competency: N
  - Board Certified Specialty: No
  - 3544 30TH ST
  - SAN DIEGO, CA 92104
  - Phone: (619) 515-2424
  - After Hours Phone: (619) 515-2424
  - Website: www.fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- **COLLINS, WILLIAM**
  - Provider ID: 206362
  - Provider Gender: Male
  - License Number: 20A15413
  - NPI: 1417361973
  - Provider English Spoken: Y
  - Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
  - Board Certified Specialty: No
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113
  - Phone: (619) 515-2300
  - After Hours Phone: (619) 515-2300
  - Email: dalvarado@fhcsd.org
  - Website: www.fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Cultural Competency: N  Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-9:00PM

FAMILY PRACTICE
CORMAN, DANIEL
Provider ID: 402851
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CORMAN, DANIEL
Provider ID: 402851
Provider Gender: Male
License Number: 20A13060
NPI: 1629339593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
DAPPEN, AMANDA
Provider ID: 227409
Provider Gender: Female
License Number: A153414
NPI: 1689037111
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
DAPPEN, AMANDA
Provider ID: 227409
D2. 初級保健名錄

Provider Gender: Female
License Number: A153414
NPI: 1689037111
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
531 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
DAVIS, DEIRDRE
Provider ID: 451167
Provider Gender: Female
License Number: A165432
NPI: 1265921365
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
FAMBRO, CYNTHIA
Provider ID: 451167
Provider Gender: Female
License Number: A153223
NPI: 1710331707
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

FAMILY PRACTICE
FLORES, JOE
Provider ID: 417937
Provider Gender: Male
License Number: A171135
NPI: 1033647409
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE
GLEASON ROHRER, GWEN
Provider ID: 233532
Provider Gender: Female
License Number: A112176
NPI: 1710140462
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
FLORES, JOE
Provider ID: 417937
Provider Gender: Male
License Number: A171135
NPI: 1033647409
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619)
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
GLEASON ROHRER, GWEN
Provider ID: 233597
Provider Gender: Female
License Number: A112176
NPI: 1710140462
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
GLEASON ROHRER, GWEN
Provider ID: 233597
Provider Gender: Female
License Number: A112176
NPI: 1710140462
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619)
D2. 初級保健名錄

563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
GLEASON ROHRER, GWEN
Provider ID: 233532
Provider Gender: Female
License Number: A112176
NPI: 1710140462
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE
GRIFFITHS, KENNETH
Provider ID: 417937
Provider Gender: Male
License Number: C52451
NPI: 1760563068
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
GRIFFITHS, TANIA
Provider ID: 417987
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
GUTIERREZ, TANIA
Provider ID: 417987
Provider Gender: Female
License Number: 20A19345
NPI: 1285196311
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

- **Provider Language(s)**
  - Spoken: Spanish
- **Cultural Competency**: N
- **Board Certified Specialty**: No
- **Address**: 4874 POLK AVE
  - SAN DIEGO, CA 92105
- **Phone**: (619) 515-2426
- **After Hours Phone**: (619) 515-2426
- **Website**: www.fhcsd.org

**FAMILY PRACTICE**

**HACHOLSKI, MARK**
- **Provider ID**: 206362
- **Provider Gender**: Male
- **License Number**: A169591
- **NPI**: 1568995694
- **Min/Max Age**: 0-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-F 8:30AM-5:30PM

**FAMILY PRACTICE**

**HAMILTON, LISA MARIE**
- **Provider ID**: 418142
- **Provider Gender**: Female
- **License Number**: 20A14772
- **NPI**: 1235576059
- **Min/Max Age**: 0-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-F 8:30AM-5:30PM

**FAMILY PRACTICE**

**HAMILTON, LISA MARIE**
- **Provider ID**: 206363
- **Provider Gender**: Female
- **License Number**: 20A14772
- **NPI**: 1235576059
- **Min/Max Age**: 0-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-F 8:30AM-5:30PM

---

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

<table>
<thead>
<tr>
<th>Provider</th>
<th>License Number</th>
<th>Provider Gender</th>
<th>Min/Max Age</th>
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<td>KAUFHOLD, ANNE</td>
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Website: www.syhealth.org/locations
D2. 初級保健名錄

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<th>FAMILY PRACTICE</th>
<th>KAUFHOLD, ANNE</th>
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<tr>
<td>NPI: 1164508073</td>
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<tr>
<td>Provider English Spoken: Y</td>
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<td>Provider Language(s): Arabic, Spanish</td>
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<tr>
<td>Cultural Competency: N</td>
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<tr>
<td>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</td>
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<td>Board Certified Specialty: No</td>
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<tr>
<td>3177 OCEAN VIEW BLVD</td>
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<tr>
<td>SAN DIEGO, CA 92113</td>
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<tr>
<td>Phone: (619) 662-4100</td>
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<tr>
<td>Fax: (619) 858-1003</td>
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<th>FAMILY PRACTICE</th>
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<td>4874 POLK AVE</td>
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<td>SAN DIEGO, CA 92105</td>
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<tr>
<td>Phone: (619) 515-2426</td>
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<td>After Hours Phone: (619) 515-2426</td>
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<td>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
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<tr>
<th>FAMILY PRACTICE</th>
<th>KEFLEZIGHI, BAHGHI</th>
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<tbody>
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<td>Provider ID: 206363</td>
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<td>Provider Gender: Female</td>
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<td>License Number: A100391</td>
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<td>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RACY CHILDRENS HOSPITAL SAN DIEGO</td>
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<td>Board Certified Specialty: No</td>
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<tr>
<td>4725 MARKET ST</td>
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<tr>
<td>SAN DIEGO, CA 92102</td>
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</tr>
<tr>
<td>Phone: (619) 515-2560</td>
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<td>Fax: (619) 263-2499</td>
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<tr>
<td>After Hours Phone: (619) 515-2560</td>
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<tr>
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<tr>
<td>Provider ID: 206363</td>
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<td>Provider Gender: Female</td>
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<tr>
<td>Board Certified Specialty: No</td>
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<td>4725 MARKET ST</td>
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<tr>
<td>SAN DIEGO, CA 92102</td>
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<tr>
<td>Phone: (619) 515-2560</td>
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<tr>
<td>Fax: (619) 263-2499</td>
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<td>After Hours Phone: (619) 515-2560</td>
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<tr>
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<td>Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
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<td>Min/Max Age: 0-150</td>
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<td>American Sign Language (ASL): N</td>
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<th>FAMILY PRACTICE</th>
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<td>Provider ID: 206363</td>
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<tr>
<td>Provider Gender: Female</td>
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<tr>
<td>License Number: A100391</td>
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<tr>
<td>NPI: 1124210844</td>
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<tr>
<td>Provider English Spoken: Y</td>
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<tr>
<td>Provider Language(s): Spanish</td>
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<tr>
<td>Cultural Competency: N</td>
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<td>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RACY CHILDRENS HOSPITAL SAN DIEGO</td>
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D2. 初級保健名錄

VISTA, Rady Childrens Hospital San Diego
Board Certified Specialty: No
4725 Market St
San Diego, CA 92102
Phone: (619) 515-2560
Fax: (619) 263-2499
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

KIDDER, BRENDAN
Provider ID: 227409
Provider Gender: Male
License Number: A112379
NPI: 1275793929
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3177 Ocean View Blvd
San Diego, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LACH, REBECCA
Provider ID: 206362
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3544 30th St
San Diego, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LACH, REBECCA
Provider ID: 417937
Provider Gender: Female
License Number: A177922
NPI: 1679137780
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參阅下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

License Number: A104052
NPI: 1124155791
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
- Board Certified Specialty: No
- 1501 IMPERIAL AVE
  SAN DIEGO, CA 92101
- Phone: (619) 233-8500
- After Hours Phone: (619) 233-8500
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
LISH, JONATHAN
Provider ID: 206360
Provider Gender: Male
License Number: A177373
NPI: 1811459456
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
- Phone: (619) 515-2300
- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
LIU, JIE
Provider ID: 206362
Provider Gender: Female
License Number: A147758
NPI: 1780066472
- Provider English Spoken: Y
- Provider Language(s): Chinese, Mandarin, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MERCY HOSPITAL
- Board Certified Specialty: No
- 3544 30TH ST
  SAN DIEGO, CA 92104
- Phone: (619) 515-2424
- After Hours Phone: (619) 515-2424
- Website: www.fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

FAMILY PRACTICE
MARSTON, JACQUELINE
Provider ID: 206046
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No

FAMILY PRACTICE
MARSTON, JACQUELINE
Provider ID: 482070
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No

FAMILY PRACTICE
MARSTON, JACQUELINE
Provider ID: 206046
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No

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D2. 初級保健名錄

279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
MARSTON, JACQUELINE
Provider ID: 206046
Provider Gender: Female
License Number: 20A12402
NPI: 1417205055
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

FAMILY PRACTICE
MATICH, BRANKO
Provider ID: 206046
Provider Gender: Male
License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
MATICH, BRANKO
Provider ID: 206046
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License Number: C174985
NPI: 1023437704
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
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D2. 初級保健名錄

Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
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Hours: M-F 8:30AM-5:30PM

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NPI: 1023437704
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Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FAMILY PRACTICE
MELGAR, MONICA
Provider ID: 402851
Provider Gender: Female
License Number: A154399
NPI: 1629432174
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TU 9:00AM-6:00PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

FAMILY PRACTICE
MORALES, ALEJANDRA
Provider ID: 227409
Provider Gender: Female
License Number: A162332
NPI: 1063945657
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
NGUYEN, NGOC
Provider ID: 517998
Provider Gender: Male
License Number: A74094
NPI: 1184668105
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Board Certified Specialty: No
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
NIAZI, HARRIS
Provider ID: 206360
Provider Gender: Male
License Number: A146111
NPI: 1174905871
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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NIAZI, HARRIS
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Provider Gender: Male
License Number: A146111
NPI: 1174905871
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
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Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
初級保健名錄

FAMILY PRACTICE  
NORRIS, JEFFREY  
Provider ID: 403583  
Provider Gender: Male  
License Number: A136275  
NPI: 1073870374  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
American Sign Language (ASL): N  
Board Certified Specialty: No  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
Website: N/A  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE  
NUQUI, JOSIE  
Provider ID: 432308  
Provider Gender: Female  
License Number: A71544  
NPI: 1184773673  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish, Tagalog  
American Sign Language (ASL): N  
Board Certified Specialty: No  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
Website: www.operationsamahan.org  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:00PM  
SA 8:30AM-5:00PM

FAMILY PRACTICE  
ORTIZ, KENNETH  
Provider ID: 517403  
Provider Gender: Male  
License Number: A71544  
NPI: 1184773673  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish, Tagalog  
American Sign Language (ASL): N  
Board Certified Specialty: No  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
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Website: www.operationsamahan.org  
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Min/Max Age: 0\999  
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SA 8:30AM-5:00PM

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Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:00PM  
SA 8:30AM-5:00PM

Website: www.operationsamahan.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:00PM  
SA 8:30AM-5:00PM
D2. 初級保健名錄

Provider Gender: Male
License Number: A156607
NPI: 1356761571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL, SCIRPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
PALOMINO, VERONICA
Provider ID: 419529
Provider Gender: Female
License Number: A121451
NPI: 1255569083
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PALOMINO, VERONICA
Provider ID: 206360
Provider Gender: Female
License Number: A121451
NPI: 1255569083
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

FAMILY PRACTICE
PALOMINO, VERONICA
Provider ID: 206360
Provider Gender: Female
License Number: A121451
NPI: 1255569083
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
PEREZ, PERNELA
Provider ID: 206363
Provider Gender: Female
License Number: A119689
NPI: 1174810972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
POSADA, SEAN
Provider ID: 206360
Provider Gender: Male
License Number: A180171
NPI: 1295100691
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

FAMILY PRACTICE
PROPST, TOBE
Provider ID: 403583
Provider Gender: Male
License Number: A82123
NPI: 1194814277
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
RAGUVEER, VISHAKA
Provider ID: 618164
Provider Gender: Female
NPI: 1740609387
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

9995 CARMEL MOUNTAIN RD STE 10-11B
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 240-6470
After Hours Phone: (844) 200-2426
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

FAMILY PRACTICE
RAMIREZ, CRISTHIAN
Provider ID: 206360
Provider Gender: Female
License Number: 20A17478
NPI: 1407200942
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
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<th>RITTER, STEVEN</th>
<th>950 S EUCLID AVE</th>
<th>SAN DIEGO, CA 92114</th>
<th>Hours: M-F 8:00AM-5:00PM</th>
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<tr>
<td>License Number</td>
<td>20A7435</td>
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<th>RODRIGUEZ, SEAN</th>
<th>3177 OCEAN VIEW BLVD</th>
<th>SAN DIEGO, CA 92113</th>
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<tr>
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<td>Phone: (619) 662-4100</td>
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<tr>
<td>Provider Gender</td>
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<td>After Hours Phone: (619) 662-4100</td>
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<tr>
<td>License Number</td>
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<td>Website: <a href="https://www.syhealth.org/locations">syhealth.org</a></td>
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<tr>
<td>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</td>
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| FAMILY PRACTICE | ROSADO, IVAN | 316 25TH ST |  | |
|-----------------|--------------|------------|--------------------------|
| Provider ID:    | 517403       | Phone: (619) 662-4100 |                     |                          |
| Provider Gender | Male         | After Hours Phone: (619) 662-4100 |               |                          |
| License Number  | A169434       | Website: [syhealth.org](https://www.syhealth.org/locations) |       |                          |
| NPI:            | 1316479603    | Medi-Cal Open Panel: Yes |                  |                          |
| Provider English Spoken | Y | Min/Max Age: 0\150 |                      |                          |
| Cultural Competency | N | American Sign Language (ASL): N |                  |                          |

**Accessibility:** CONTACT PROVIDER
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<td>517403</td>
<td>FAMILY PRACTICE</td>
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<td>CONTACT PROVIDER</td>
<td>316 25TH ST</td>
<td>(619) 662-4100</td>
<td>(619) 662-4100</td>
<td>N/A</td>
<td><a href="mailto:aschmaltz@lamaestra.org">aschmaltz@lamaestra.org</a></td>
</tr>
<tr>
<td>SCHUMAKER, EDWARD</td>
<td>185268</td>
<td>FAMILY PRACTICE</td>
<td>Spanish</td>
<td>CONTACT PROVIDER</td>
<td>4060 FAIRMOUNT AVE</td>
<td>(619) 255-9155</td>
<td>284-4731</td>
<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
<td><a href="mailto:sabay@fhcsd.org">sabay@fhcsd.org</a></td>
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<tr>
<td>SCOTT, RYLEE</td>
<td>402851</td>
<td>FAMILY PRACTICE</td>
<td>Spanish</td>
<td>CONTACT PROVIDER</td>
<td>3705 MISSION BLVD</td>
<td>(619) 515-2300</td>
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<td><a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
<td><a href="mailto:aschmaltz@lamaestra.org">aschmaltz@lamaestra.org</a></td>
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<td>SCHUMAKER, EDWARD</td>
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<td>4060 FAIRMOUNT AVE</td>
<td>(619) 255-9155</td>
<td>284-4731</td>
<td><a href="http://www.lamaestra.org">www.lamaestra.org</a></td>
<td><a href="mailto:sabay@fhcsd.org">sabay@fhcsd.org</a></td>
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<td>SCOTT, RYLEE</td>
<td>402851</td>
<td>FAMILY PRACTICE</td>
<td>Spanish</td>
<td>CONTACT PROVIDER</td>
<td>3705 MISSION BLVD</td>
<td>(619) 515-2300</td>
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<td><a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
<td><a href="mailto:aschmaltz@lamaestra.org">aschmaltz@lamaestra.org</a></td>
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D2. 初級保健名錄

Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SCOTT, LAGINA
Provider ID: 206360
Provider Gender: Female
License Number: A160489
NPI: 1558897009
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SHEIKH, ZARA
Provider ID: 233532
Provider Gender: Female
License Number: A163512
NPI: 1952808727
Provider English Spoken: Y
Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified Specialty: No

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SHEIKH, ZARA
Provider ID: 233597
Provider Gender: Female
License Number: A163512
NPI: 1952808727
Provider English Spoken: Y
Provider Language(s) Spoken: Urdu
Cultural Competency: N
Board Certified Specialty: No

4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

FAMILY PRACTICE
SHEIKH, ZARA
Provider ID: 233532
Provider Gender: Female
License Number: A163512
NPI: 1952808727
Provider English Spoken: Y
Provider Language(s) Spoken: Urdu
Cultural Competency: N
### FAMILY PRACTICE

**SHIRAKI, JEAN**

- Provider ID: 417987
- Provider Gender: Female
- License Number: 20A17577
- NPI: 1144684382
- Provider English Spoken: Y
- Provider Language(s) Spoken: Japanese
- Cultural Competency: N
- Board Certified Specialty: No

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<th>Min/Max Age:</th>
<th>American Sign Language (ASL):</th>
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<tr>
<td>4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105</td>
<td>(619) 280-2058</td>
<td>(619) 280-2058</td>
<td><a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a></td>
<td>Yes</td>
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<tr>
<td>4874 POLK AVE SAN DIEGO, CA 92105</td>
<td>(619) 515-2426</td>
<td>(619) 515-2426</td>
<td><a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
<td>Yes</td>
<td>0\150</td>
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<td>1831489855</td>
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<tr>
<td>4290 POLK AVE SAN DIEGO, CA 92105</td>
<td>(619) 563-0250</td>
<td>(619) 563-0250</td>
<td><a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
<td>Yes</td>
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**SHUMILAK, KAILI**

- Provider ID: 418142
- Provider Gender: Female
- License Number: 20A12796
- NPI: 1831489855
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No

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<th>Address</th>
<th>Phone</th>
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<td>4874 POLK AVE SAN DIEGO, CA 92105</td>
<td>(619) 515-2426</td>
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<td><a href="http://www.fhcsd.org">www.fhcsd.org</a></td>
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<td>1831489855</td>
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<tr>
<td>5160 FEDERAL BLVD SAN DIEGO, CA 92105</td>
<td>(619) 515-2454</td>
<td>(619) 515-2454</td>
<td><a href="mailto:nancyl@fhcsd.org">nancyl@fhcsd.org</a></td>
<td>Yes</td>
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</table>
D2. 初级保健名录

- Provider Language(s)
  - Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

Provider ID: 206360
Phone: (619) 515-2454
After Hours Phone: (619) 515-2454
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SMOOT, CHARLES
Provider ID: 206360
Provider Gender: Male
License Number: A97036
NPI: 1245490358
Provider English Spoken: Y
Provider Language(s)
  - Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

FAMILY PRACTICE
SMOOT, CHARLES
Provider ID: 356145
Provider Gender: Male
License Number: A97036
NPI: 1245490358
Provider English Spoken: Y
Provider Language(s)
  - Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

2391 ISLAND AVE
SAN DIEGO, CA 92102
Phone: (619) 515-2435
After Hours Phone: (619) 515-2435
Website: N/A
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SMOOT, CHARLES
Provider ID: 517998
Provider Gender: Male
License Number: 20A7502

1333
D2. 初級保健名錄

NPI: 1922041235
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH
Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SOPHY, ELIZABETH
Provider ID: 403583
Provider Gender: Female
License Number: A157547
NPI: 1013441203
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
Snyder, Christopher
Provider ID: 517998
Provider Gender: Male
License Number: 20A7502
NPI: 1922041235
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH
Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SUMMERS-DAY, COURTNEY
Provider ID: 214492
Provider Gender: Female
License Number: A112781
NPI: 1124288873
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIH
Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): Y
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA
VISTA
Board Certified Specialty: No

1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
After Hours Phone: (619) 429-3733
Website: www.ibclinic.org
Email: avaldez@ibclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SWARTZ, JOHN
Provider ID: 403583
Provider Gender: Male
License Number: G72486
NPI: 1396754131
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL CHULA
VISTA, SCRIPPS MERCY
HOSPITAL, LOS ANGELES
COUNTY HARBOR UCLA
MEDICAL CENTER
Board Certified Specialty: No

1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
THAI, JUSTIN
Provider ID: 206360
Provider Gender: Male
License Number: A177462
NPI: 1093276198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
D2. 初級保健名錄

PHONE: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
THAI, JUSTIN
Provider ID: 206360
Provider Gender: Male
License Number: A177462
NPI: 1093276198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FAMILY PRACTICE
THAI, JUSTIN
Provider ID: 417937
Provider Gender: Male
License Number: A177462
NPI: 1093276198
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
THOMAS, ZACHARY
Provider ID: 417987
Provider Gender: Male
License Number: A145023
NPI: 1326453119
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
THOMAS, ZACHARY
Provider ID: 417987
Provider Gender: Male
License Number: A145023
NPI: 1326453119
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
FAMILY PRACTICE
TOWNSEND, LAURIE
Provider ID: 206363
Provider Gender: Female
License Number: C174538
NPI: 1053754333
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
TRAN, TONNIA
Provider ID: 233597
Provider Gender: Female
License Number: 20A7662
NPI: 1982746657
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare .org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
TRUONG, NHA
Provider ID: 417937
Provider Gender: Female
License Number: 20A17836
NPI: 1760975833
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2400
After Hours Phone: (619)

PROVIDER
515-2400
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
TRUONG, NHA
Provider ID: 417937
Provider Gender: Female
License Number: 20A17836
NPI: 1760975833
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
1209 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2400
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
TSUCHIYA, KIMIKO
Provider ID: 417782
Provider Gender: Female
License Number: 20A19610
NPI: 1629637285
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1205 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619) 515-2430
Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
VALENZUELA, TRICIA
Provider ID: 206363
Provider Gender: Female
License Number: A161373
NPI: 1346776358
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
VALENZUELA, TRICIA
Provider ID: 206363
Provider Gender: Female
License Number: A161373
NPI: 1346776358
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
| Provider Name                       | Provider ID | Gender       | License Number | NPI          | Hospital Affiliation                                                                 | Board Certified Specialty | Min/Max Age | American Sign Language (ASL) | Accessibility | Phone | After Hours Phone | Website                   | Medi-Cal Open Panel | American Sign Language (ASL) | Accessibility | Hours | Website | Provider English Spoken | Provider Language(s) | Cultural Competency | Provider ID | Gender       | License Number | NPI | Hospital Affiliation | Board Certified Specialty | Medi-Cal Open Panel | Hospital Affiliation | Board Certified Specialty | Phone | After Hours Phone | Website | Provider English Spoken | Provider Language(s) | Cultural Competency |
|------------------------------------|-------------|--------------|----------------|--------------|----------------------------------------------------------------------------------------|----------------------------|-------------|------------------------------|---------------|-------|------------------|-------------------------|-------------------|----------------------------|-----------------|-------|----------------|--------------------------|-------------------|----------------------|----------------------|-------|------------------|----------------------|--------------------------|----------------------|-----------------|-----------------|---------------------|----------------|------------------|-----------------|---------------------|
| **FAMILY PRACTICE**                |             |              |                |              |                                                                                       |                            |             |                              |               |       |                  |                          | Yes               |                           |                |       |                  |                          |                   |                      |                     |       |                  |                          |                          |                      |                |                |                     |
| **VILLA, MARIA**                   | 107710      | Female       |                | 1861541385   | LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON      | No                         | 0\150       | N                            | CONTACT PROVIDER         | (619) 575-4442 | (619) 233-8500 | N/A                       |                          | Yes               |                           |                |       |                  |                          |                   |                      |                     |       |                  |                          |                          |                      |                |                |                     |
| **WHITE, KATHERINE**               | 227409      | Female       |                | 1801112925   | SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL                          | No                         | 0\999       | N                            | CONTACT PROVIDER         | (619) 662-4100 | (619) 662-4100 | https://www.syhealth.org/locations |                          | Yes               |                           |                |       |                  |                          |                   |                      |                     |       |                  |                          |                          |                      |                |                |                     |
| **WANG, REGINA**                   | 403583      | Female       |                | 1154554871   | LONG BEACH MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON      | No                         | 0\150       | N                            | CONTACT PROVIDER         | (619) 233-8500 | (619) 233-8500 | N/A                       |                          | Yes               |                           |                |       |                  |                          |                   |                      |                     |       |                  |                          |                          |                      |                |                |                     |
D2. 初級保健名錄

Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
WU, JENNIFER
Provider ID: 403583
Provider Gender: Female
License Number: A54702
NPI: 1215953013
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ZAHLER, MARVIN
Provider ID: 417937
Provider Gender: Male
License Number: 20A11612
NPI: 1134380710
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

**PROVIDER**

**FAMILY PRACTICE**

**ZINK, IRENE**

Provider ID: 227409  
Provider Gender: Female  
License Number: C54198  
NPI: 1215959549

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

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

- 3177 OCEAN VIEW BLVD  
  SAN DIEGO, CA 92113  
- Phone: (619) 662-4100  
- After Hours Phone: (619) 662-4100  
- Website: https://www.syhealth.org/locations

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

**FQHC**

**DIAMOND NEIGHBORHOODS**

**FAMILY HLTH CTRS INC,**

Provider ID: 206363  
NPI: 1982747671

- Provider English Spoken: Y  
- Cultural Competency: N

- 4725 MARKET ST  
  SAN DIEGO, CA 92102  
- Phone: (619) 515-2560  
- Fax: (619) 263-2499  
- After Hours Phone: (619) 515-2560  
- Website: www.fhcsd.org  
  Email: nancyl@fhcsd.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

**FQHC**

**DOWNTOWN FAMILY CTR AT CONNECTIONS,**

Provider ID: 417782  
NPI: 1588901045

- Provider English Spoken: Y  
- Cultural Competency: N

- 1250 6TH AVE STE 100  
  SAN DIEGO, CA 92101  
- Phone: (619) 515-2430  
- Fax: (619) 578-2410  
- After Hours Phone: (619) 515-2430  
- Website: www.fhcsd.org  
  Email: jinah@fhcsd.org

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM
### FQHC
**DOWNTOWN FAMILY CTR AT CONNECTIONS,**  
Provider ID: 417782  
NPI: 1588901045  
- Provider English Spoken: Y  
- Cultural Competency: N  
- 1250 6TH AVE STE 100  
  SAN DIEGO, CA 92101  
- Phone: (619) 515-2430  
- Fax: (619) 578-2410  
- After Hours Phone: (619) 515-2430  
- Website: www.fhcsd.org  
- Email: jinah@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:00AM-5:00PM

### FQHC
**FAMILY HEALTH CTR IBARRA,**  
Provider ID: 417987  
NPI: 1477953933  
- Provider English Spoken: Y  
- Cultural Competency: N  
- 4874 POLK AVE  
  SAN DIEGO, CA 92105  
- Phone: (619) 515-2426  
- Fax: (619) 255-8002  
- After Hours Phone: (619) 515-2426  
- Website: www.fhcsd.org  
- Email: jinah@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:30AM-5:30PM

### FQHC
**FAMILY HEALTH CTR OF SD-ELM ST,**  
Provider ID: 419167  
NPI: 1316419070  
- Provider English Spoken: Y  
- Cultural Competency: N  
- 140 ELM ST  
  SAN DIEGO, CA 92101  
- Phone: (619) 515-2520  
- Fax: (619) 231-0431  
- After Hours Phone: (619) 515-2520  
- Website: www.fhcsd.org  
- Email: jinah@fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\150  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:00AM-5:00PM

### FQHC
**FAMILY HEALTH CTR SAN DIEGO-OAK PARK,**  
Provider ID: 664747  
NPI: 1336525906  
- Provider English Spoken: Y  
- Cultural Competency: N  
- 2114 NATIONAL AVE  
  SAN DIEGO, CA 92113  
- Phone: (619) 515-2406  
- After Hours Phone: (619) 515-2406  
- Website: www.fhcsd.org  
- Medi-Cal Open Panel: Yes
D2. 初級保健名錄

Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC
FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: 664747
NPI: 1336525906
 Provider English Spoken: Y
Cultural Competency: N
  2114 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2406
 After Hours Phone: (619) 515-2406
 Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC
FAMILY HEALTH CTR SAN DIEGO-OAK PARK,
Provider ID: 418142
NPI: 1336525906
 Provider English Spoken: Y
Cultural Competency: N
  5160 FEDERAL BLVD
SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 Fax: (619) 794-2696
 After Hours Phone: (619) 515-2454
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,
Provider ID: 419529
NPI: 1235521782
 Provider English Spoken: Y
Cultural Competency: N
  2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 Fax: (619) 269-0053
 After Hours Phone: (619) 515-2422
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL,
Provider ID: 419529
NPI: 1235521782
 Provider English Spoken: Y
Cultural Competency: N
  2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 Fax: (619) 269-0053
 After Hours Phone: (619) 515-2422
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

1343
D2. 初級保健名錄

Provider ID: 417429
NPI: 1952729303
☑️ Provider English Spoken: Y
□ Cultural Competency: N

1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
Fax: (619) 501-5814
☑️ After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC
FAMILY HLTH CTR SAN DIEGO-BEACH AREA,
Provider ID: 402851
NPI: 1386689701
☑️ Provider English Spoken: Y
□ Cultural Competency: N

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
Fax: (858) 488-1394
☑️ After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

FQHC
FAMILY HLTH CTR SAN DIEGO-CITY COLLEGE,
Provider ID: 417429
NPI: 1952729303
☑️ Provider English Spoken: Y
□ Cultural Competency: N

1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
Fax: (619) 501-5814
☑️ After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC
FAMILY HLTH CTR SAN DIEGO-BEACH AREA,
Provider ID: 402851
NPI: 1386689701
☑️ Provider English Spoken: Y
□ Cultural Competency: N

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
Fax: (858) 488-1394
☑️ After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FQHC
FAMILY HLTH CTR SD HILLCREST,
Provider ID: 417937
NPI: 1629456900
☑️ Provider English Spoken: Y
□ Cultural Competency: N

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
Fax: (619) 501-9645
☑️ After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

FQHC
FAMILY HLTH CTR SD HILLCREST,
Provider ID: 417937
NPI: 1629456900
☑️ Provider English Spoken: Y
□ Cultural Competency: N
### FQHC
#### KING CHAVEZ HEALTH CENTER,
Provider ID: 451167  
NPI: 1538262092  
Provider English Spoken: Y  
Cultural Competency: N  
950 S EUCLID AVE  
SAN DIEGO, CA 92114  
Phone: (619) 662-4100  
Fax: (619) 205-1952  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org/clinics/king-chavez-health-center  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
SA 8:00AM-4:00PM

#### LA MAESTRA FAMILY CLINIC INC,
Provider ID: 185268  
NPI: 1336353721  
Provider English Spoken: Y  
Cultural Competency: N  
4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
Phone: (619) 280-4213  
Fax: (619) 795-9849  
After Hours Phone: (619) 280-4213  
Website: www.lamaestra.org  
Email: aschmaltz@lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

#### LINDA VISTA HEALTH CARE CTR,  
Provider ID: 206046  
NPI: 1780665877  
Provider English Spoken: Y  
Cultural Competency: N  
6973 LINDA VISTA RD

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4094 4TH AVE  
SAN DIEGO, CA 92103  
Phone: (619) 515-2545  
Fax: (619) 501-9645  
After Hours Phone: (619) 515-2545  
Website: www.fhcsd.org  
Email: fabianm@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-TH 8:00AM-9:00PM  
F 8:00AM-5:00PM
D2. 初級保健名錄

SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC
LINDA VISTA HEALTH CARE CTR,
Provider ID: 206046
NPI: 1609905215
Provider English Spoken: Y
Cultural Competency: N
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

FQHC
LOGAN HEIGHTS FAMILY HEALTH CENTER,
Provider ID: 206360
NPI: 1447281936
Provider English Spoken: Y
Cultural Competency: N
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 234-2447
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

FQHC
LOGAN HEIGHTS FAMILY HEALTH CENTER,
Provider ID: 624977
NPI: 1447281936
Provider English Spoken: Y
Cultural Competency: N
2204 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2355
Fax: (619) 232-7011
After Hours Phone: (619) 515-2355
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
MID-CITY COMMUNITY CLINIC,
Provider ID: 233597
NPI: 1962483040
Provider English Spoken: Y
Cultural Competency: N
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
MID-CITY COMMUNITY CLINIC,
Provider ID: 233532
NPI: 1962483040
Provider English Spoken: Y
Cultural Competency: N
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC
MID-CITY COMMUNITY CLINIC,
Provider ID: 233597
NPI: 1962483040
Provider English Spoken: Y
Cultural Competency: N
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4682
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

- **After Hours Phone:** (619) 563-0250
- **Website:** www.sdfamilycare.org
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **SA:** 8:00AM-2:00PM

**FQHC NESTOR COMMUNITY HEALTH CENTER,**
Provider ID: 214492
NPI: 1215246996
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **1016 OUTER RD SAN DIEGO, CA 92154**
- **Phone:** (619) 429-3733
- **Fax:** (619) 628-5550
- **After Hours Phone:** (619) 429-3733
- **Website:** www.ibclinic.org
- **Email:** avaldez@ibclinic.org
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M 8:30AM-5:00PM
- **TU-TH:** 8:30AM-8:00PM
- **F:** 8:30AM-5:00PM

**FQHC NORTH PARK FAMILY HEALTH CENTERS,**
Provider ID: 416831
NPI: 1700821303
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **3514 30TH ST SAN DIEGO, CA 92104**
- **Phone:** (619) 515-2424
- **Fax:** (619) 683-7586
- **After Hours Phone:** (619) 515-2424
- **Website:** www.fhcsd.org
- **Email:** jenanm@fhcsd.org
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\18
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-TH 8:00AM-5:00PM

**FQHC NORTH PARK FAMILY HEALTH CENTERS,**
Provider ID: 206362
NPI: 1700821303
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **3544 30TH ST SAN DIEGO, CA 92104**
- **Phone:** (619) 515-2424
- **Fax:** (619) 501-0627
- **After Hours Phone:** (619) 515-2424
- **Website:** www.fhcsd.org
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
D2. 初級保健名錄

N

Accessibility: CONTACT PROVIDER

FQHC

NORTH PARK FAMILY HEALTH CENTERS,
Provider ID: 416831
NPI: 1700821303
Provider English Spoken: Y
Cultural Competency: N
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
Fax: (619) 683-7586
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

FQHC

OPERATION SAMAHAN - MIRA MESA,
Provider ID: 417101
NPI: 1871680397
Provider English Spoken: Y
Cultural Competency: N
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

FQHC

OPERATION SAMAHAN - MIRA MESA,
Provider ID: 432308
NPI: 1861933897
Provider English Spoken: Y
Cultural Competency: N
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
Fax: (858) 536-8034
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

OPERATION SAMAHAN - MIRA MESA,
Provider ID: 432308
NPI: 1861933897
Provider English Spoken: Y
Cultural Competency: N
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
Fax: (858) 536-8034
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FQHC

OPERATION SAMAHAN RANCHO PENASQUITOS,
Provider ID: 418535
NPI: 1699216622
Provider English Spoken: Y
D2. 初級保健名錄

Cultural Competency: N
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
Phone: (844) 200-2426
Fax: (858) 695-9074
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

FQHC
SAN DIEGO AMERICAN INDIAN HEALTH CENTER,
Provider ID: 207382
NPI: 1003902917
Provider English Spoken: Y
Cultural Competency: N
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Website: WWW.SDAIHC.ORG
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Indian Health Services: Y

FQHC
SAN DIEGO FAMILY CARE,
Provider ID: 482070
NPI: 1457724858
Provider English Spoken: Y
Cultural Competency: N
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

FQHC
SAN DIEGO FAMILY CARE,
Provider ID: 482070
NPI: 1457724858
Provider English Spoken: Y
D2. 初級保健名錄

Cultural Competency: N
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

FQHC
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE,
Provider ID: 517403
NPI: 1598308926
Provider English Spoken: Y
Cultural Competency: N
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 238-5551
Fax: (619) 238-3807
After Hours Phone: (619) 238-5551
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE,
Provider ID: 517403
NPI: 1598308926
Provider English Spoken: Y
Cultural Competency: N
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 238-5551
Fax: (619) 238-3807
After Hours Phone: (619) 238-5551
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE,
Provider ID: 517403
NPI: 1598308926
Provider English Spoken: Y
Cultural Competency: N
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 238-5551
Fax: (619) 238-3807
After Hours Phone: (619) 238-5551
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE,
Provider ID: 517403
NPI: 1598308926
Provider English Spoken: Y
Cultural Competency: N
316 25TH ST
SAN DIEGO, CA 92102
Phone: (619) 238-5551
Fax: (619) 238-3807
After Hours Phone: (619) 238-5551
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH CHC - OCEAN VIEW,
Provider ID: 227409
NPI: 1326225632
Provider English Spoken: Y
Cultural Competency: N
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 595-0258
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH CHC - OCEAN VIEW,
Provider ID: 227409
NPI: 1326225632
Provider English Spoken: Y
Cultural Competency: N
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 595-0258
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH CHC - OCEAN VIEW,
Provider ID: 227409
NPI: 1326225632
Provider English Spoken: Y
Cultural Competency: N
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 595-0258
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,
Provider ID: 517998
NPI: 1205477841
Provider English Spoken: Y
Cultural Competency: N
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 824-9076
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH COMMUNITY HEIGHTS FAMILY MED,
Provider ID: 517998
NPI: 1205477841
Provider English Spoken: Y
Cultural Competency: N
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 824-9076
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

Min/Max Age: 0-120
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HEALTH
COMMUNITY HEIGHTS FAMILY MED,
Provider ID: 517998
NPI: 1205477841
 Provider English Spoken: Y
Cultural Competency: N
 4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 824-9076
 After Hours Phone: (619) 662-4100
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-120
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SHERMAN HEIGHTS FAMILY HLTH CTRS INC,
Provider ID: 356145
NPI: 1174549232
 Provider English Spoken: Y
Cultural Competency: N
 2391 ISLAND AVE
SAN DIEGO, CA 92102
Phone: (619) 515-2435
Fax: (619) 515-2435
 After Hours Phone: (619) 515-2435
 Website: N/A
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

FQHC
SHERMAN HEIGHTS FAMILY HLTH CTRS INC,
Provider ID: 356145
NPI: 1174549232
 Provider English Spoken: Y
Cultural Competency: N
 2391 ISLAND AVE
SAN DIEGO, CA 92102
Phone: (619) 515-2435
Fax: (619) 515-2435
 After Hours Phone: (619) 515-2435
 Website: N/A
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

FQHC
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER,
Provider ID: 403583
NPI: 1598122871
 Provider English Spoken: Y
Cultural Competency: N
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

FQHC
ST VINCENT DE PAUL VILLAGE
FAMILY HEALTH CENTER,
Provider ID: 403583
NPI: 1598122871
 Provider English Spoken: Y
Cultural Competency: N
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
 After Hours Phone: (619) 233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

GASTROENTEROLOGY
FRENELLE, CATHERINE
Provider ID: 417937
Provider Gender: Female
License Number: A80461
D2. 初級保健名錄

NPI: 1417935081
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CALIFORNIA PACIFIC MED CTR
- Board Certified Specialty: No
- 4094 4TH AVE
  SAN DIEGO, CA 92103
- Phone: (619) 515-2545
- After Hours Phone: (619) 515-2545
- Website: www.fhcsd.org
- Email: fabianm@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-TH 8:00AM-9:00PM
  F 8:00AM-5:00PM

GASTROENTEROLOGY
HAI, FAIZI
- Provider ID: 417937
- Provider Gender: Male
- License Number: A159324
- NPI: 1639523228
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 4094 4TH AVE
  SAN DIEGO, CA 92103
- Phone: (619) 515-2545
- After Hours Phone: (619) 515-2545
- Website: www.fhcsd.org
- Email: fabianm@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-TH 8:00AM-9:00PM
  F 8:00AM-5:00PM

GASTROENTEROLOGY
FRENETTE, CATHERINE
- Provider ID: 417937
- Provider Gender: Female
- License Number: A80461
- NPI: 1417935081
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CALIFORNIA PACIFIC MED CTR
- Board Certified Specialty: No
- 4094 4TH AVE
  SAN DIEGO, CA 92103
- Phone: (619) 515-2545
- After Hours Phone: (619) 515-2545
- Website: www.fhcsd.org
- Email: fabianm@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-TH 8:00AM-9:00PM
  F 8:00AM-5:00PM

GENERAL PRACTICE
BELLO, OSAGIE
- Provider ID: 417101
- Provider Gender: Male
- License Number: A115182
- NPI: 1164726378
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS GREEN
D2. 初級保健名錄

HOSPITAL
Board Certified Specialty: No
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:30PM

GENERAL PRACTICE
BELLO, OSAGIE
Provider ID: 417101
Provider Gender: Male
License Number: A115182
NPI: 1164726378
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
3490 PALM AVE
SAN DIEGO, CA 92154
Phone: (619) 423-5616
Fax: (619) 423-5684
After Hours Phone: (619) 423-5616
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 2\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
DOAN STEPHENS, CRYSTAL
Provider ID: 233532
Provider Gender: Female
License Number: A152267
NPI: 1730570144
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
BORRERO, MARCOS
Provider ID: 100677
Provider Gender: Male
NPI: 1952312621
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
DOAN STEPHENS, CRYSTAL
Provider ID: 233532
Provider Gender: Female
License Number: A152267
NPI: 1730570144
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
RECALDE, FRANCISCO
Provider ID: 13850
Provider Gender: Male
NPI: 1538309067
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
3811 EL CAJON BLVD
SAN DIEGO, CA 92105
Phone: (619) 284-5622
Fax: (619) 283-2572
After Hours Phone: (619) 507-3050
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

HEPATOLOGY
GISH, ROBERT
Provider ID: 185268
Provider Gender: Male
License Number: G45632
NPI: 1548281322
Provider English Spoken: Y
Provider Language(s) Spoken: Dutch, French, Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY COMM MED CTR
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
ALASSIL, SALLY
Provider ID: 206360
Provider Gender: Female
License Number: A122238

Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

NPI: 1982044483
_provider English Spoken: Y
_provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
_phone: (619) 515-2300
_after Hours Phone: (619) 515-2300
_website: www.fhcsd.org
_email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
ALASSIL, SALLY
Provider ID: 206360
Provider Gender: Female
License Number: A122238
NPI: 1982044483
_provider English Spoken: Y
_provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
_phone: (619) 515-2422
_after Hours Phone: (619) 515-2422
_website: www.fhcsd.org
_email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
ALASSIL, SALLY
Provider ID: 419529
Provider Gender: Female
License Number: A122238
NPI: 1982044483
_provider English Spoken: Y
_provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
_phone: (619) 515-2422
_after Hours Phone: (619) 515-2422
_website: www.fhcsd.org
_email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
ALDOUS, JEANNETTE
Provider ID: 451167
Provider Gender: Female
License Number: A101017
NPI: 1073650339
_provider English Spoken: Y
_provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
950 S EUCLID AVE
SAN DIEGO, CA 92114
_phone: (619) 662-4100
_after Hours Phone: (619) 662-4100
_website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
D2. 初級保健名錄

ALDOUS, JEANNETTE
Provider ID: 451167
Provider Gender: Female
License Number: A101017
NPI: 1073650339
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Board Certified Specialty: No
950 S EUCLID AVE
SAN DIEGO, CA 92114
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
ANDREWS, JOHN
Provider ID: 403583
Provider Gender: Male
License Number: G71080
NPI: 1003164302
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
- Phone: (619) 233-8500
- After Hours Phone: (619) 233-8500
- Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
BOHR, CHRISTINA
Provider ID: 417937
Provider Gender: Female
License Number: 20A17702
NPI: 1841794344
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
- Phone: (619) 515-2545
- After Hours Phone: (619) 515-2545
- Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
BRIONES COLMAN, FELICIA
Provider ID: 1357
Provider Gender: Male
License Number: G71080
NPI: 1003164302
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
- Phone: (619) 233-8500
- After Hours Phone: (619) 233-8500
- Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
BOHR, CHRISTINA
Provider ID: 417937
Provider Gender: Female
License Number: 20A17702
NPI: 1841794344
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
- Phone: (619) 515-2545
- After Hours Phone: (619) 515-2545
- Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
BRIONES COLMAN, FELICIA
Provider ID: 1357
Provider Gender: Male
License Number: G71080
NPI: 1003164302
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
- Phone: (619) 233-8500
- After Hours Phone: (619) 233-8500
- Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Provider ID: 417937
Provider Gender: Female
License Number: A80153
NPI: 1962517367
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 4094 4TH AVE
  SAN DIEGO, CA 92103
- Phone: (619) 515-2545
  After Hours Phone: (619) 515-2545
- Website: www.fhcsd.org
- Email: fabianm@fhcsd.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\-150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TH 8:00AM-9:00PM
  F 8:00AM-5:00PM

INTERNAL MEDICINE
CHAN, ANDY
Provider ID: 417937
Provider Gender: Male
License Number: 20A20352
NPI: 1104480912
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 4094 4TH AVE
  SAN DIEGO, CA 92103
- Phone: (619) 515-2545
  After Hours Phone: (619) 515-2545
- Website: www.fhcsd.org
- Email: fabianm@fhcsd.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\-150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TH 8:00AM-9:00PM
  F 8:00AM-5:00PM

INTERNAL MEDICINE
BRIONES COLMAN, FELICIA
Provider ID: 417937
Provider Gender: Female
License Number: A80153
NPI: 1962517367
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 4094 4TH AVE
  SAN DIEGO, CA 92103
- Phone: (619) 515-2545
  After Hours Phone: (619) 515-2545
- Website: www.fhcsd.org
  Email: fabianm@fhcsd.org
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\-150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-TH 8:00AM-9:00PM
  F 8:00AM-5:00PM

INTERNAL MEDICINE
CHAN, ANDY
Provider ID: 417937
Provider Gender: Male
License Number: 20A20352
NPI: 1104480912
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 4094 4TH AVE
  SAN DIEGO, CA 92103
- Phone: (619) 515-2545
  After Hours Phone: (619) 515-2545
- Website: www.fhcsd.org
- Email: fabianm@fhcsd.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\-150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TH 8:00AM-9:00PM
  F 8:00AM-5:00PM

INTERNAL MEDICINE
CSAPOCZI, PETER
Provider ID: 451167
Provider Gender: Male
License Number: A96919
NPI: 1841357118
- Provider English Spoken: Y
- Provider Language(s): Hungarian, Spanish, Ukrainian
- Cultural Competency: N
- Board Certified Specialty: No
- 950 S EUCLID AVE
  SAN DIEGO, CA 92114
- Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
- Website: www.syhealth.org
  /clinics/king-chavez-healt
D2. 初級保健名錄

- **h- center**
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0 \( \rightarrow \) 150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:00AM-5:00PM
  - SA 8:00AM-4:00PM

**INTERNAL MEDICINE**

- **CSAPOCZI, PETER**
  - Provider ID: 451167
  - Provider Gender: Male
  - License Number: A96919
  - NPI: 1841357118
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Hungarian, Spanish, Ukrainian
  - Cultural Competency: N
  - Board Certified Specialty: No
  - Provider English Spoken: Y
  - Provider Language(s): Hebrew
  - Cultural Competency: N
  - Board Certified Specialty: No
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0 \( \rightarrow \) 150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - 950 S EUCLID AVE
  - SAN DIEGO, CA 92114
  - Phone: (619) 662-4100
  - After Hours Phone: (619) 662-4100
  - Website: www.syhealth.org/clinics/king-chavez-health-center

- **CURTIS, MEGAN**
  - Provider ID: 206360
  - Provider Gender: Female
  - License Number: A187390
  - NPI: 1699138115
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Hungarian
  - Cultural Competency: N
  - Board Certified Specialty: No
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Hungarian
  - Cultural Competency: N
  - Board Certified Specialty: No
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0 \( \rightarrow \) 150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113
  - Phone: (619) 515-2300
  - After Hours Phone: (619) 515-2300
  - Website: www.fhcsd.org
  - Email: dalvarado@fhcsd.org

- **DAHMS, ERIC**
  - Provider ID: 417937
  - Provider Gender: Male
  - License Number: G80316
  - NPI: 1306808464
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Hungarian
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
  - Board Certified Specialty: No
  - 4094 4TH AVE
  - SAN DIEGO, CA 92103
  - Phone: (619) 515-2545
  - After Hours Phone: (619) 515-2545
  - Website: www.fhcsd.org
  - Email: fabianm@fhcsd.org

- **CURTIS, MEGAN**
  - Provider ID: 206360
  - Provider Gender: Female
  - License Number: A187390
  - NPI: 1699138115
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Hungarian
  - Cultural Competency: N
  - Board Certified Specialty: No
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Hungarian
  - Cultural Competency: N
  - Board Certified Specialty: No
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0 \( \rightarrow \) 150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113
  - Phone: (619) 515-2300
  - After Hours Phone: (619) 515-2300
  - Website: www.fhcsd.org
  - Email: dalvarado@fhcsd.org

**INTERNAL MEDICINE**

- **DAHMS, ERIC**
  - Provider ID: 417937
  - Provider Gender: Male
  - License Number: G80316
  - NPI: 1306808464
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Hungarian
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
  - Board Certified Specialty: No
  - 4094 4TH AVE
  - SAN DIEGO, CA 92103
  - Phone: (619) 515-2545
  - After Hours Phone: (619) 515-2545
  - Website: www.fhcsd.org
  - Email: fabianm@fhcsd.org

**INTERNAL MEDICINE**

- **DAHMS, ERIC**
  - Provider ID: 417937
  - Provider Gender: Male
  - License Number: G80316
  - NPI: 1306808464
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Hungarian
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
  - Board Certified Specialty: No
  - 4094 4TH AVE
  - SAN DIEGO, CA 92103
  - Phone: (619) 515-2545
  - After Hours Phone: (619) 515-2545
  - Website: www.fhcsd.org
  - Email: fabianm@fhcsd.org
D2. 初級保健名錄

Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
DIEP, KEVIN
Provider ID: 417937
Provider Gender: Male
License Number: 20A17657
NPI: 1083117865
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE
DIXIT, SHUBHAM
Provider ID: 417937
Provider Gender: Male
License Number: 20A21421
NPI: 1932785367
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE
DOMINGUEZ, FERNANDO
Provider ID: 417937
Provider Gender: Male
License Number: A154708
NPI: 1972917672
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE
DIXIT, SHUBHAM
Provider ID: 417937
Provider Gender: Male
License Number: 20A21421
NPI: 1932785367
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Board Certified Specialty: No

4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE
DOMINGUEZ, FERNANDO
Provider ID: 417937
Provider Gender: Male
License Number: A154708
NPI: 1972917672
D2. 初級保健名錄

- **DOMINGUEZ, FERNANDO**
  - Provider ID: 417937
  - Provider Gender: Male
  - License Number: A154708
  - NPI: 1972994762
  - Provider English Spoken: Y
  - Provider Language(s): Spanish
  - Cultural Competency: N
  - Board Certified Specialty: No
  - 4094 4TH AVE
  - SAN DIEGO, CA 92103
  - Phone: (619) 515-2545
  - After Hours Phone: (619) 515-2545
  - Website: www.fhcsd.org
  - Email: fabianm@fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-TH 8:00AM-9:00PM
  - F 8:00AM-5:00PM

- **FABELLA, GABRIEL**
  - Provider ID: 9774
  - Provider Gender: Male
  - NPI: 1124060827
  - Provider English Spoken: Y
  - Provider Language(s): Spanish, Tagalog
  - Cultural Competency: N
  - Board Certified Specialty: No
  - 10737 CAMINO RUIZ STE 115
  - SAN DIEGO, CA 92126
  - Phone: (858) 622-6262
  - Fax: (858) 695-2132
  - After Hours Phone: (858) 695-2132
  - Website: N/A
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 18\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- **FARASAT, SADAF**
  - Provider ID: 206360
  - Provider Gender: Female
  - License Number: A147939
  - NPI: 1255696407
  - Provider English Spoken: Y
  - Provider Language(s): Hindi, Punjabi, Urdu
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, NATIVIDAD MEDICAL CENTER, PALOMAR MEDICAL CENTER
  - Board Certified Specialty: No
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113
  - Phone: (619) 515-2300
  - After Hours Phone: (619) 515-2300
  - Website: www.fhcsd.org
  - Email: dalvarado@fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- **FARASAT, SADAF**
  - Provider ID: 206360
  - Provider Gender: Female
  - License Number: A147939
  - NPI: 1255696407
  - Provider English Spoken: Y
  - Provider Language(s): Hindi, Punjabi, Urdu
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, NATIVIDAD MEDICAL CENTER, PALOMAR MEDICAL CENTER
  - Board Certified Specialty: No
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113
  - Phone: (619) 515-2300
  - After Hours Phone: (619) 515-2300
  - Website: www.fhcsd.org
  - Email: dalvarado@fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

如欲線上獲取精神健康服務提供者清單, 請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
GERWER, JOHANNA
Provider ID: 206360
Provider Gender: Female
License Number: A169752
NPI: 1043742588
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
GUTIERREZ, ANGELICA
Provider ID: 233597
Provider Gender: Female
License Number: A175116
NPI: 1982180329
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
HAZELBAKER, PAUL
Provider ID: 417782
Provider Gender: Male
License Number: 20A7147
NPI: 1831106103
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619) 515-2430
D2. 初級保健名錄

Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

INTERNAL MEDICINE
HAZELBAKER, PAUL
Provider ID: 417782
Provider Gender: Male
License Number: 20A7147
NPI: 1831106103
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1250 6TH AVE STE 100
SAN DIEGO, CA 92101
Phone: (619) 515-2430
After Hours Phone: (619) 515-2430
Website: www.fhcsd.org
Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE
HENDERSON, PHILIP
Provider ID: 417937
Provider Gender: Male
License Number: A140324
NPI: 1447678834
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE
JAMISON, KAREN
Provider ID: 417937
Provider Gender: Female
License Number: A95356
NPI: 1285830505
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
Fax: (619) 501-9645
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

INTERNAL MEDICINE
JAMISON, KAREN
Provider ID: 417937
Provider Gender: Female
License Number: A95356
NPI: 1285830505
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
### D2. 初級保健名錄

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<th>联系人</th>
<th>医师</th>
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<td>License Number: A67762</td>
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<td>INTERNAL MEDICINE</td>
<td>LALITHAKUMARI, ARYA</td>
<td>Provider ID: 206362</td>
<td>Provider Gender: Female</td>
<td>License Number: A140646</td>
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**您的 PCP 的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得 Blue Shield 的事先授权，然后该服务才能获得承保。**

如欲线上获取精神健康服务提供者清单，请造访 blueshieldca.com/fad。
### INTERNAL MEDICINE

#### LALITHAKUMARI, ARYA

- Provider ID: 206362
- Provider Gender: Female
- License Number: A140646
- NPI: 1265874010
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center
- Board Certified Specialty: No
- San Diego, CA 92104
- Phone: (619) 515-2424
- After Hours Phone: (619) 515-2424
- Website: www.fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

#### LAMANTIA, MICHELE

- Provider ID: 451167
- Provider Gender: Female
- License Number: A71671
- NPI: 1124176102
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 950 S Euclid Ave
- San Diego, CA 92114
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org/clinics/king-chavez-health-center
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

#### LEE, MICHAEL

- Provider ID: 206360
- Provider Gender: Male
- License Number: A71671
- NPI: 1760406649
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
- Board Certified Specialty: No
- 3544 30th St
- San Diego, CA 92104
- Phone: (619) 515-2424
- After Hours Phone: (619) 515-2424
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

#### LEE, MICHAEL

- Provider ID: 206360
- Provider Gender: Male
- License Number: A71671
- NPI: 1760406649
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL
- Board Certified Specialty: No
- 1809 National Ave
- San Diego, CA 92113
- Phone: (619) 515-2300
- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

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**San Diego, CA 92104**

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After Hours Phone: (619) 515-2424

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

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Accessibility: CONTACT PROVIDER

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**San Diego, CA 92113**

Phone: (619) 515-2300

After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

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After Hours Phone: (619) 515-2300

Website: www.fhcsd.org

Email: dalvarado@fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
LU, STEPHANIE
Provider ID: 206362
Provider Gender: Female
License Number: 20A20252
NPI: 1518524586
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
MARCINIAK, ROMAN
Provider ID: 206360
Provider Gender: Male
License Number: 20A17072
NPI: 1326579210
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
MARCINIAK, ROMAN
Provider ID: 206360
Provider Gender: Male
License Number: 20A17072
NPI: 1326579210
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
NARANJO, RODRIGO
Provider ID: 482070
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
NARANJO, RODRIGO
Provider ID: 482070
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
NARANJO, RODRIGO
Provider ID: 482070
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700

1366
D2. 初級保健名錄

INTERNAL MEDICINE
NARANJO, RODRIGO
Provider ID: 482070
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org

INTERNAL MEDICINE
NARANJO, RODRIGO
Provider ID: 206046
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

INTERNAL MEDICINE
NARANJO, RODRIGO
Provider ID: 206046
Provider Gender: Male
License Number: A119010
NPI: 1609095264
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

INTERNAL MEDICINE
NARAYANAN, MEENA
Provider ID: 206363
Provider Gender: Female
License Number: A113448
NPI: 1508170697
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, Adventist Health and Rideout
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
PARIKH, MILIND
Provider ID: 206363
Provider Gender: Male
License Number: 20A13745
NPI: 1194161406
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, Adventist Health and Rideout
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
NARAYANAN, MEENA
Provider ID: 206363
Provider Gender: Female
License Number: A113448
NPI: 1508170697
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, Adventist Health and Rideout
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

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INTERNAL MEDICINE
RAMERS, CHRISTIAN
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License Number: A119631
NPI: 1730381385
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.SA 8:00AM-2:00PM
.Provider ID: 417937
.Provider Gender: Male
.License Number: A119631
.NPI: 1730381385
.Provider English Spoken: Y
.Provider Language(s)
  Spoken: Spanish
.Cultural Competency: N
.Board Certified Specialty: No
.Hours: M-F 8:00AM-6:00PM
.SA 8:00AM-2:00PM
.Provider ID: 417937
.Provider Gender: Male
.License Number: A119631
.NPI: 1730381385
.Provider English Spoken: Y
.Provider Language(s)
  Spoken: Spanish
.Cultural Competency: N
.Board Certified Specialty: No
.Hours: M-F 8:00AM-6:00PM
.SA 8:00AM-2:00PM
.Provider ID: 417937
.Provider Gender: Male
.License Number: A119631
.NPI: 1730381385
.Provider English Spoken: Y
.Provider Language(s)
  Spoken: Spanish
.Cultural Competency: N
.Board Certified Specialty: No
.Hours: M-F 8:00AM-6:00PM
.SA 8:00AM-2:00PM
.Provider ID: 417937
.Provider Gender: Male
.License Number: A119631
.NPI: 1730381385
.Provider English Spoken: Y
.Provider Language(s)
D2. 初級保健名錄

Provider ID: 417937
Provider Gender: Female
License Number: A185024
NPI: 1598342529
在美国 Sign Language (ASL): Y
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM F 8:00AM-5:00PM

INTERNAL MEDICINE
SHI, RUJING
Provider ID: 417937
Provider Gender: Female
License Number: 20A19399
NPI: 1710446539
在美国 Sign Language (ASL): Y
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM F 8:00AM-5:00PM

INTERNAL MEDICINE
SASSIC, JESSICA
Provider ID: 417937
Provider Gender: Female
License Number: A185024
NPI: 1598342529
在美国 Sign Language (ASL): Y
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM F 8:00AM-5:00PM

INTERNAL MEDICINE
SMILDE, RENEE
Provider ID: 417937
Provider Gender: Female
License Number: A70175
NPI: 1427010594
在美国 Sign Language (ASL): Y
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM F 8:00AM-5:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 0\150  
**American Sign Language (ASL)**: N  

**Accessibility**: CONTACT PROVIDER  
**Hours**: M-TH 8:00AM-9:00PM  
F 8:00AM-5:00PM

**INTERNAL MEDICINE**

**SMILDE, RENEE**  
Provider ID: 417937  
Provider Gender: Female  
License Number: A70175  
NPI: 1427010594  

- **Provider English Spoken**: Y  
- **Provider Language(s)**:  
  Spoken: Dutch  

**Cultural Competency**: N  
**Hospital Affiliation**: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
**Board Certified Specialty**: No  
**1809 NATIONAL AVE**  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300  
Website: www.fhcsd.org  
Email: fabianm@fhcsd.org  
**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 0\150  
**American Sign Language (ASL)**: N  

**Accessibility**: CONTACT PROVIDER

**INTERNAL MEDICINE**

**URIBE-BRUCE, LILIANA**  
Provider ID: 206360  
Provider Gender: Female  
License Number: C55724  
NPI: 1689010324  

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

**Cultural Competency**: N  
**Board Certified Specialty**: No  
**1809 NATIONAL AVE**  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300  
Website: www.fhcsd.org  
Email: dalvarado@fhcsd.org  
**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 0\150  
**American Sign Language (ASL)**: N  

**Accessibility**: CONTACT PROVIDER

**INTERNAL MEDICINE**

**VALDEZ, KRYSTAL**  
Provider ID: 417101  
Provider Gender: Female  
License Number: A156854  
NPI: 1629480272  

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

**Cultural Competency**: N  
**Board Certified Specialty**: No  
**10737 CAMINO RUIZ STE 235**  
SAN DIEGO, CA 92126  
Phone: (844) 200-2426  
After Hours Phone: (844) 200-2426  
Website: www.operationsamahan.org  
**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 0\150  
**American Sign Language (ASL)**: N  

**Accessibility**: CONTACT PROVIDER  
**Hours**: M-F 8:00AM-4:30PM

**INTERNAL MEDICINE**

**URIBE-BRUCE, LILIANA**  
Provider ID: 206360  
Provider Gender: Female  
License Number: C55724  
NPI: 1689010324  

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

**Cultural Competency**: N  
**Board Certified Specialty**: No  
**1809 NATIONAL AVE**  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300  
Website: www.fhcsd.org  
Email: dalvarado@fhcsd.org  
**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 0\150  
**American Sign Language (ASL)**: N  

**Accessibility**: CONTACT PROVIDER

**INTERNAL MEDICINE**

**VALDEZ, KRYSTAL**

---

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Provider ID: 417101
Provider Gender: Female
License Number: A156854
NPI: 1629480272
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
VIDAURRAZAGA, MONICA
Provider ID: 417937
Provider Gender: Female
License Number: A169207
NPI: 1346628310
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
WASTILA, LISA
Provider ID: 403583
Provider Gender: Female
License Number: A60801
NPI: 1043375231
Provider English Spoken: Y
Provider Language(s)
  Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
WASTILA, LISA
Provider ID: 403583
Provider Gender: Female
License Number: A60801
NPI: 1043375231
Provider English Spoken: Y
Provider Language(s)
  Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619)
D2. 初級保健名錄

233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
WATTANAMANO, PORNTHEP
Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE
WATTANAMANO, PORNTHEP
Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE
WATTANAMANO, PORNTHEP
Provider ID: 206046
Provider Gender: Male
License Number: C186338
NPI: 1295738516
Provider English Spoken: Y
Provider Language(s) Spoken: Thai
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

INTERNAL MEDICINE
WATTS, ELI
Provider ID: 451167
Provider Gender: Male
License Number: A79383
NPI: 1649373739
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
D2. 初級保健名錄

**INTERNAL MEDICINE**

**WATTS, ELI**

Provider ID: 451167  
Provider Gender: Male  
License Number: A79383  
NPI: 1649373739  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL  
Board Certified Specialty: No  
950 S EUCLID AVE  
SAN DIEGO, CA 92114  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org/clinics/king-chavez-health-center

**INTERVENTIONAL CARDIOLOGY**

**MOUSSAVIAN, MEHRAN**

Provider ID: 206363  
Provider Gender: Male  
License Number: 20A7241  
NPI: 1689788234  
Provider English Spoken: Y  
Provider Language(s): Farsi  
Cultural Competency: N  
Hospital Affiliation: SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Adventist Health and Rideout  
Board Certified Specialty: No  
4725 MARKET ST  
SAN DIEGO, CA 92102  
Phone: (619) 263-2499  
After Hours Phone: (619) 263-2499  
Website: www.fhcsd.org  
Email: nancyl@fhcsd.org

**INTERVENTIONAL CARDIOLOGY**

**SHETABI, KAMBIZ**

Provider ID: 206363  
Provider Gender: Male

---

獲取精神健康服務提供者清單：

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

License Number: A126187
NPI: 1972827806
- Provider English Spoken: Y
- Provider Language(s): Spoken: Farsi, Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP
- CHULA VISTA MED CTR, Sharp Grossmont Hospital
- Board Certified Specialty: No
- Phone: (619) 515-2560
- After Hours Phone: (619) 515-2560
- Website: www.fhcsd.org
- Email: nancyl@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

NEUROLOGY

CANTU-REYNA, GUILLERMO
Provider ID: 185268
Provider Gender: Male
License Number: A41375
NPI: 1447389101
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SHARP
- CHULA VISTA MED CTR
- Board Certified Specialty: No
- 4060 FAIRMOUNT AVE
- SAN DIEGO, CA 92105
- Phone: (619) 255-9155
- After Hours Phone: (619) 255-9155
- Website: www.lamaestra.org
- Email: aschmaltz@lamaestra.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

AL-MSHHDANI, AYSER
Provider ID: 185268
Provider Gender: Female
License Number: A172929
NPI: 1679008569
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: PALOMAR
  MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL
D2. 初級保健名錄

Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
AL-MSHHDANI, AYSER
Provider ID: 185268
Provider Gender: Female
License Number: A172929
NPI: 1679008569
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ALIMONOS, LYSISTRATI
Provider ID: 206362
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ALIMONOS, LYSISTRATI
Provider ID: 416831
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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D2. 初級保健名錄

515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
ALIMONOS, LYSISTRATI
Provider ID: 402851
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: GROSSMONT HOSPITAL,
  SCRIPPS MERCY HOSPITAL
- Board Certified Specialty: No
- 3514 30TH ST
  SAN DIEGO, CA 92104
- Phone: (619) 515-2424
  After Hours Phone: (619) 515-2424
- Website: www.fhcsd.org
- Email: sabay@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ALIMONOS, LYSISTRATI
Provider ID: 206363
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: GROSSMONT HOSPITAL,
  SCRIPPS MERCY HOSPITAL
- Board Certified Specialty: No
- 4725 MARKET ST
  SAN DIEGO, CA 92102
- Phone: (619) 515-2560
  After Hours Phone: (619) 515-2560
- Website: www.fhcsd.org
- Email: nancyl@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

**OBSTETRICS / GYNECOLOGY**

**ALIMONOS, LYSISTRATI**

Provider ID: 206363  
Provider Gender: Female  
License Number: 20A14919  
NPI: 1619397031

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
- Board Certified Specialty: No

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

- Phone: (619) 515-2300  
- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: nancyl@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

- Phone: (619) 515-2300  
- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**ALIMONOS, LYSISTRATI**

Provider ID: 206360  
Provider Gender: Female  
License Number: 20A14919  
NPI: 1619397031

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
- Board Certified Specialty: No

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

- Phone: (858) 279-0925  
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

- Phone: (858) 279-0925  
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**BLAKE, GARY**

Provider ID: 206046  
Provider Gender: Male  
License Number: G44807  
NPI: 1497738439

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

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

- Phone: (858) 279-0925  
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**BLAKE, GARY**

Provider ID: 206046  
Provider Gender: Male  
License Number: G44807  
NPI: 1497738439

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

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

- Phone: (858) 279-0925  
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

SAN DIEGO, CA 92111

Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

OBSTETRICS / GYNECOLOGY
BLAKE, GARY
Provider ID: 206046
Provider Gender: Male
License Number: G44807
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BUECHNER, CHARLENE
Provider ID: 402851
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
D2. 初級保健名錄

After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BUECHNER, CHARLENE
Provider ID: 416831
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BUECHNER, CHARLENE
Provider ID: 206362
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BUECHNER, CHARLENE
Provider ID: 416831
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

BOARD CERTIFIED SPECIALTY: NO

3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org

BUECHNER, CHARLENE
Provider ID: 206360
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN AND NEWBORNS

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2420
After Hours Phone: (619) 515-2420
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

BUECHNER, CHARLENE
Provider ID: 206360
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY
BIRCH HOSP FOR WOMEN AND NEWBORNS

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org

ACCESSIBILITY: CONTACT PROVIDER
D2. 初級保健名錄

CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2420
After Hours Phone: (619) 515-2420
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 206363
Provider Gender: Male
License Number: A113001
NPI: 1225231582

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2420
After Hours Phone: (619) 515-2420
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 206360
Provider Gender: Male
License Number: A113001
NPI: 1225231582

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 206360
Provider Gender: Male
License Number: A113001
NPI: 1225231582

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No

4725 MARKET ST
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 206360
Provider Gender: Male
License Number: A113001
NPI: 1225231582

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No

1809 NATIONAL AVE
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
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Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 206360
Provider Gender: Male
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Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No

4725 MARKET ST
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Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
D2. 初級保健名錄

CITY MEDICAL CTR
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 206362
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): Y
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 416831
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRI CITY MEDICAL CTR
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:00PM
TH 9:30AM-6:00PM

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 416831
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No

3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 416831
Provider Gender: Female
License Number: A118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL, SHARP CORONADO HOSP AND
HEALTHCARE CTR
Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Your PCP’s doctor group may have its own network内的 mental health service providers. Please refer to the list below. You can directly contact these providers. Please note that some services may require prior authorization from your mental health service provider, and then it can be covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 206362
Provider Gender: Female
License Number: A118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:30PM
M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 416831
Provider Gender: Female
License Number: A118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:30PM
M-F 8:00AM-5:00PM

D2. 初級保健名錄
D2. 初級保健名錄

Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 206360
Provider Gender: Female
License Number: A118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 206363
Provider Gender: Female
License Number: A118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 206363
Provider Gender: Female
License Number: A118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
D2. 初級保健名錄

MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
Provider ID: 206363
Provider Gender: Female
License Number: A163464
NPI: 1326531401

Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
Provider ID: 206360
Provider Gender: Female
License Number: A163464
NPI: 1326531401

Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
Provider ID: 416831
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
Provider ID: 402851
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp
Grossmont Hospital
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
D2. 初級保健名錄

TH 9:00AM-6:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
DE MIK, TRAVIS
Provider ID: 402851
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
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OBSTETRICS / GYNECOLOGY
DE MIK, TRAVIS
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OBSTETRICS / GYNECOLOGY
DE MIK, TRAVIS
Provider ID: 206360
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DE MIK, TRAVIS
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DE MIK, TRAVIS
Provider ID: 206360
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License Number: A108228
NPI: 1629277322
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Email: dalvarado@fhcsd.org
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Min/Max Age: 0\150
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Accessibility: CONTACT PROVIDER
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DE MIK, TRAVIS
Provider ID: 206363
Provider Gender: Male
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Board Certified Specialty: No
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OBSTETRICS / GYNECOLOGY

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Provider ID: 206363
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DORUELO, ASHLEY
Provider ID: 206363
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DORUELO, ASHLEY
Provider ID: 206360
Provider Gender: Female
License Number: A178499

Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1390
D2. 初級保健名錄

NPI: 1033613732
- Provider English Spoken: Y
- Provider Language(s): Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCIRPES MERCY HOSPITAL, Sharp Grossmont Hospital
- Board Certified Specialty: No
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
  Phone: (619) 515-2300
  After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DORUELO, ASHLEY
Provider ID: 416831
Provider Gender: Female
License Number: A178499
NPI: 1033613732
- Provider English Spoken: Y
- Provider Language(s): Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCIRPES MERCY HOSPITAL, Sharp Grossmont Hospital
- Board Certified Specialty: No
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
  Phone: (619) 515-2300
  After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DORUELO, ASHLEY
Provider ID: 206360
Provider Gender: Female
License Number: A178499
NPI: 1033613732
- Provider English Spoken: Y
- Provider Language(s): Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCIRPES MERCY HOSPITAL, Sharp Grossmont Hospital
- Board Certified Specialty: No
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
  Phone: (619) 515-2300
  After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DORUELO, ASHLEY
Provider ID: 402851
Provider Gender: Female
License Number: A178499
NPI: 1033613732
- Provider English Spoken: Y
- Provider Language(s): Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCIRPES MERCY HOSPITAL, Sharp Grossmont Hospital
- Board Certified Specialty: No
- 3705 MISSION BLVD
  SAN DIEGO, CA 92109
  Phone: (619) 515-2444
  After Hours Phone: (619) 1391
D2. 初級保健名錄

515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DORUELO, ASHLEY
Provider ID: 402851
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR, BEATRIZ
Provider ID: 416831
Provider Gender: Female
License Number: A148014
NPI: 1457794752
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1392
D2. 初級保健名錄

Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR, BEATRIZ
Provider ID: 206362
Provider Gender: Female
License Number: A148014
NPI: 1457794752
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR, BEATRIZ
Provider ID: 206360
Provider Gender: Female
License Number: A148014
NPI: 1457794752
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR, BEATRIZ
Provider ID: 416831
Provider Gender: Female
License Number: A148014
NPI: 1457794752
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR, BEATRIZ
Provider ID: 206360
Provider Gender: Female
License Number: A148014
NPI: 1457794752
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
🔎 1809 NATIONAL AVE
SAN DIEGO, CA 92113
📞 Phone: (619) 515-2300
📞 After Hours Phone: (619) 515-2300
✉️ Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR,
BEATRIZ
Provider ID: 206360
Provider Gender: Female
License Number: A148014
NPI: 1457794752
Provider English Spoken: Y
Provider Language(s):
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
🔎 4725 MARKET ST
SAN DIEGO, CA 92102
📞 Phone: (619) 515-2560
📞 After Hours Phone: (619) 515-2560
✉️ Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR,
BEATRIZ
Provider ID: 206363
Provider Gender: Female
License Number: A148014
NPI: 1457794752
Provider English Spoken: Y
Provider Language(s):
Spoken: Spanish, Yue
Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
🔎 4725 MARKET ST
SAN DIEGO, CA 92102
📞 Phone: (619) 515-2560
📞 After Hours Phone: (619) 515-2560
✉️ Website: www.fhcsd.org
D2. 初級保健名錄

Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
HANLEY, LAUREN
Provider ID: 206363
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
HANLEY, LAUREN
Provider ID: 416831
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
HANLEY, LAUREN
Provider ID: 206360
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

1395
D2. 初級保健名錄

Provider Gender: Female
License Number: C174771
NPI: 1053392035
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
- Board Certified Specialty: No
  - 3514 30TH ST
  - SAN DIEGO, CA 92104
  - Phone: (619) 515-2424
  - After Hours Phone: (619) 515-2424
  - Website: www.fhcsd.org
  - Email: jenanm@fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\18
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
HANLEY, LAUREN
Provider ID: 402851
Provider Gender: Female
License Number: C174771
NPI: 1053392035
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
- Board Certified Specialty: No
  - 3705 MISSION BLVD
  - SAN DIEGO, CA 92109
  - Phone: (619) 515-2444
  - After Hours Phone: (619) 515-2444
  - Website: www.fhcsd.org
  - Email: sabay@fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-W 8:30AM-5:30PM TH 9:00AM-6:00PM F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
LIPSCHITZ, LISA
Provider ID: 402851
Provider Gender: Female
License Number: C174771
NPI: 1649208711
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
- Board Certified Specialty: No
  - 3514 30TH ST
  - SAN DIEGO, CA 92104
  - Phone: (619) 515-2424
  - After Hours Phone: (619) 515-2424
  - Website: www.fhcsd.org
  - Email: jenanm@fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\18
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-TH 8:00AM-5:00PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

- **Provider Language(s)**
  - Spoken: Spanish
  - Cultural Competency: N
- **Hospital Affiliation**: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
- **Board Certified Specialty**: No
- **Address**: 3705 MISSION BLVD, SAN DIEGO, CA 92109
- **Phone**: (619) 515-2444
- **After Hours Phone**: (619) 515-2444
- **Website**: www.fhcsd.org
- **Email**: sabay@fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-W 8:30AM-5:00PM
  - TH 9:30AM-6:00PM

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
- **Provider ID**: 402851
- **Provider Gender**: Female
- **License Number**: A72005
- **NPI**: 1649208711
- **Address**: 3705 MISSION BLVD, SAN DIEGO, CA 92109
- **Phone**: (619) 515-2444
- **After Hours Phone**: (619) 515-2444
- **Website**: www.fhcsd.org
- **Email**: sabay@fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-W 8:30AM-5:00PM
  - TH 9:30AM-6:00PM

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
- **Provider ID**: 416831
- **Provider Gender**: Female
- **License Number**: A72005
- **NPI**: 1649208711
- **Address**: 3705 MISSION BLVD, SAN DIEGO, CA 92109
- **Phone**: (619) 515-2444
- **After Hours Phone**: (619) 515-2444
- **Website**: www.fhcsd.org
- **Email**: sabay@fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-W 8:30AM-5:00PM
  - TH 9:30AM-6:00PM

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
- **Provider ID**: 416831
- **Provider Gender**: Female
- **License Number**: A72005
- **NPI**: 1649208711
- **Address**: 3705 MISSION BLVD, SAN DIEGO, CA 92109
- **Phone**: (619) 515-2444
- **After Hours Phone**: (619) 515-2444
- **Website**: www.fhcsd.org
- **Email**: sabay@fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-W 8:30AM-5:00PM
  - TH 9:30AM-6:00PM

**OBSTETRICS / GYNECOLOGY**

**LIPSCHITZ, LISA**
- **Provider ID**: 206362
- **Provider Gender**: Female
- **License Number**: A72005
- **NPI**: 1649208711
- **Address**: 3705 MISSION BLVD, SAN DIEGO, CA 92109
- **Phone**: (619) 515-2444
- **After Hours Phone**: (619) 515-2444
- **Website**: www.fhcsd.org
- **Email**: sabay@fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Hours**: M-W 8:30AM-5:00PM
  - TH 9:30AM-6:00PM

Your PCP’s doctor group may have their own network内的 mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from the mental health service provider before being covered.

If you want to access the mental health provider list online, please visit blueshieldca.com/fad.
D2. 初級保健名錄

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL,
  GROSSMONT HOSPITAL
- Board Certified Specialty: No
- 3514 30TH ST
  SAN DIEGO, CA 92104
- Phone: (619) 515-2424
- After Hours Phone: (619) 515-2424
- Website: www.fhcsd.org
- Email: jenanm@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\18
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
LIPSCHITZ, LISA
Provider ID: 206360
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL,
  GROSSMONT HOSPITAL
- Board Certified Specialty: No
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
- Phone: (619) 515-2300
- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
LIPSCHITZ, LISA
Provider ID: 206363
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL,
  GROSSMONT HOSPITAL
- Board Certified Specialty: No
- 3544 30TH ST
  SAN DIEGO, CA 92104
- Phone: (619) 515-2424
- After Hours Phone: (619) 515-2424
- Website: www.fhcsd.org
- Email: jenanm@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\18
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
LIPSCHITZ, LISA
Provider ID: 206360
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL,
  GROSSMONT HOSPITAL
- Board Certified Specialty: No
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
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- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
LOEFFLER, ALLISON
Provider ID: 206363
Provider Gender: Female
License Number: A116680
NPI: 1700073962

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
LIPSCHITZ, LISA
Provider ID: 206363
Provider Gender: Female
License Number: A72005
NPI: 1649208711

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
LOEFFLER, ALLISON
Provider ID: 206363
Provider Gender: Female
License Number: A116680
NPI: 1700073962

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

1399
D2. 初級保健名錄

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

**Hospital Affiliation:**
- GROSSMONT HOSPITAL,
- SCRIPPS MERCY HOSPITAL,
- SCRIPPS MERCY HOSPITAL CHULA VISTA

**Board Certified Specialty**: No

- **Address**: 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113
- **Phone**: (619) 515-2300
- **After Hours Phone**: (619) 515-2300
- **Website**: www.fhcsd.org
- **Email**: dalvarado@fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\150
- **American Sign Language (ASL)**: N
- **Hospital Affiliation**: GROSSMONT HOSPITAL,
  - SCRIPPS MERCY HOSPITAL,
  - SCRIPPS MERCY HOSPITAL

**Accessibility**: CONTACT PROVIDER

**Hours**:
- M 8:00AM-7:00PM
- TU-TH 8:00AM-6:00PM
- F 8:00AM-5:30PM
- SA 8:00AM-5:00PM

**OBSTETRICS / GYNECOLOGY**

**LOEFFLER, ALLISON**

- **Provider ID**: 206360
- **Provider Gender**: Female
- **License Number**: A116680
- **NPI**: 1700073962
- **Provider English Spoken**: Y
- **Provider Language(s)**
  - Spoken: Spanish
- **Cultural Competency**: N

**Hospital Affiliation**:
- GROSSMONT HOSPITAL,
- SCRIPPS MERCY HOSPITAL,
- SCRIPPS MERCY HOSPITAL CHULA VISTA

**Board Certified Specialty**: No

- **Address**: 3514 30TH ST
  - SAN DIEGO, CA 92104
- **Phone**: (619) 515-2424
- **After Hours Phone**: (619) 515-2424
- **Website**: www.fhcsd.org
- **Email**: jenanm@fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\18
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**LOEFFLER, ALLISON**

- **Provider ID**: 416831
- **Provider Gender**: Female
- **License Number**: A116680
- **NPI**: 1700073962
- **Provider English Spoken**: Y
- **Provider Language(s)**
  - Spoken: Spanish
- **Cultural Competency**: N

**Hospital Affiliation**:
- GROSSMONT HOSPITAL,
- SCRIPPS MERCY HOSPITAL,
- SCRIPPS MERCY HOSPITAL CHULA VISTA

**Board Certified Specialty**: No

- **Address**: 3544 30TH ST
  - SAN DIEGO, CA 92104
- **Phone**: (619) 515-2424
- **After Hours Phone**: (619) 515-2424
- **Website**: www.fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**LOEFFLER, ALLISON**

- **Provider ID**: 206362
- **Provider Gender**: Female
- **License Number**: A116680
- **NPI**: 1700073962
- **Provider English Spoken**: Y
- **Provider Language(s)**
  - Spoken: Spanish
- **Cultural Competency**: N

**Hospital Affiliation**:
- GROSSMONT HOSPITAL,
- SCRIPPS MERCY HOSPITAL,
- SCRIPPS MERCY HOSPITAL

**Board Certified Specialty**: No

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- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\18
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**LOEFFLER, ALLISON**

- **Provider ID**: 416832
- **Provider Gender**: Female
- **License Number**: A116680
- **NPI**: 1700073962
- **Provider English Spoken**: Y
- **Provider Language(s)**
  - Spoken: Spanish
- **Cultural Competency**: N

**Hospital Affiliation**:
- GROSSMONT HOSPITAL,
- SCRIPPS MERCY HOSPITAL,
- SCRIPPS MERCY HOSPITAL

**Board Certified Specialty**: No

- **Address**: 3544 30TH ST
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- **After Hours Phone**: (619) 515-2424
- **Website**: www.fhcsd.org
- **Email**: jenanm@fhcsd.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0\18
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
D2. 初級保健名錄

Provider ID: 206362
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
LOEFFLER, ALLISON
Provider ID: 402851
Provider Gender: Female
License Number: A116680
NPI: 1700073962
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3705 MISSION BLVD
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Email: sabay@fhcsd.org
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OBSTETRICS / GYNECOLOGY
MELENDEZ BERRIOS, IARA DEL
Provider ID: 416831
Provider Gender: Female
License Number: A114181
NPI: 1740514249
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
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Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
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American Sign Language (ASL): N
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**OBSTETRICS / GYNECOLOGY**

**MELENDEZ BERRIOS, IARA DEL**

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**MELENDEZ BERRIOS, IARA DEL**

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D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY
MELENDEZ BERRIOS, IARA DEL
Provider ID: 206360
Provider Gender: Female
License Number: A114181
NPI: 1740514249
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
MELENDEZ BERRIOS, IARA DEL
Provider ID: 206363
Provider Gender: Female
License Number: A114181
NPI: 1740514249
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
PHAN, TIFFANI
Provider ID: 417101
Provider Gender: Female
License Number: A161105
NPI: 1134515695
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
PHAN, TIFFANI
Provider ID: 417101
Provider Gender: Female
License Number: A161105
NPI: 1134515695
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
RODRIGUEZ JEREZ, ROBERTO
Provider ID: 402851
Provider Gender: Male
License Number: A154298
NPI: 1710316450
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No

3705 MISSION BLVD
SAN DIEGO, CA 92126
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

SAN DIEGO, CA 92109
Phone: (616) 515-2444
After Hours Phone: (616) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
RODRIGUEZ JEREZ, ROBERTO
Provider ID: 416831
Provider Gender: Male
License Number: A154298
NPI: 1710316450
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
RODRIGUEZ JEREZ, ROBERTO
Provider ID: 206362
Provider Gender: Male
License Number: A154298
NPI: 1710316450
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1405
D2. 初級保健名錄

Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
RODRIGUEZ JEREZ, ROBERTO
Provider ID: 206363
Provider Gender: Male
License Number: A154298
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Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2420
After Hours Phone: (619) 515-2420
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
RODRIGUEZ JEREZ, ROBERTO
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License Number: A154298
NPI: 1710316450
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2420
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

515-2300

Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-7:00PM
TU-TH 8:00AM-6:00PM
F 8:00AM-5:30PM
SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY

SAPRA, SONIA
Provider ID: 206360
Provider Gender: Female
License Number: A164859
NPI: 1952751711

Provider English Spoken: Y
Provider Language(s) Spoken: Hindi
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

1809 NATIONAL AVE
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OBSTETRICS / GYNECOLOGY

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Provider ID: 206363
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Board Certified Specialty: No

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OBSTETRICS / GYNECOLOGY
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Board Certified Specialty: No
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- Phone: (619) 515-2444
- After Hours Phone: (619) 515-2444
- Website: www.fhcsd.org
- Email: sabay@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
SHUCKETT, ARIEL
Provider ID: 206046
Provider Gender: Female
License Number: A144372
NPI: 1245590124
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
- Board Certified Specialty: No
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
SHUCKETT, ARIEL
Provider ID: 206046
Provider Gender: Female
License Number: A144372
NPI: 1245590124
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
- Board Certified Specialty: No
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
STABEN, REBECCA
Provider ID: 402851
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-W 8:30AM-5:30PM
TH 9:00AM-6:00PM
F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
STABEN, REBECCA
Provider ID: 416831
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
STABEN, REBECCA
Provider ID: 206363
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: Sharp Grossmont Hospital
- Board Certified Specialty: No
- 4725 MARKET ST
  SAN DIEGO, CA 92102
- Phone: (619) 515-2560
- After Hours Phone: (619) 515-2560
- Website: www.fhcsd.org
  Email: nancyl@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
STABEN, REBECCA
Provider ID: 206360
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: Sharp Grossmont Hospital
- Board Certified Specialty: No
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
- Phone: (619) 515-2300
- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
  Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
TRUJILLO, JENNIFER
Provider ID: 451167
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
- Board Certified Specialty: No
- 950 S EUCLID AVE
  SAN DIEGO, CA 92114
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org
  /clinics/king-chavez-health-center
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY
TRUJILLO, JENNIFER
Provider ID: 451167
Provider Gender: Female
License Number: 20A8204
NPI: 1053407593
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/king-chavez-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 206360
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2420
After Hours Phone: (619) 515-2420
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 206360
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 206363
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2400
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 416831
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 206362
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2400
After Hours Phone: (619) 515-2400
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-5:30PM
F 8:30AM-5:00PM

1413
D2. 初級保健名錄

Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 402851
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 416831
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 402851
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN
Provider ID: 206362
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSPIT
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN
Provider ID: 416831
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSPIT
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN
Provider ID: 402851
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSPIT
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN
Provider ID: 416831
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSPIT
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參阅下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN
Provider ID: 206362
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN
Provider ID: 206360
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN
Provider ID: 206363
Provider Gender: Male
License Number: G78814
NPI: 1699790634
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SHARP CORONADO HOSP
AND HEALTHCARE CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
<table>
<thead>
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<th>Provider</th>
<th>ID</th>
<th>Gender</th>
<th>License</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Provider Language(s)</th>
<th>Cultural Competency</th>
<th>Hospital Affiliation</th>
<th>Board Certified Specialty</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>ZIEG, ALAN</td>
<td>206363</td>
<td>Male</td>
<td>G78814</td>
<td>1699790634</td>
<td>Y</td>
<td>Farsi, Persian, Spanish</td>
<td>N</td>
<td>GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL</td>
<td>No</td>
<td>M-F 8:00AM-5:00PM</td>
</tr>
<tr>
<td>Najafi, David</td>
<td>206360</td>
<td>Male</td>
<td>A68124</td>
<td>1396715991</td>
<td>Y</td>
<td>Farsi, Persian, Spanish</td>
<td>N</td>
<td>GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL</td>
<td>No</td>
<td>M-TU 8:30AM-6:00PM, TH 8:30AM-6:00PM, F 8:30AM-5:00PM, SA 8:30AM-5:00PM</td>
</tr>
</tbody>
</table>

**OBSTETRICS / GYNECOLOGY**

**ZIEG, ALAN**
Provider ID: 206363
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

**OPHTHALMOLOGY**

**NAJAFI, DAVID**
Provider ID: 206360
Provider Gender: Male
License Number: A68124
NPI: 1396715991
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

**OPHTHALMOLOGY**

**SHAW, BLAKE**
Provider ID: 206363
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

**OPHTHALMOLOGY**

**NAJAFI, DAVID**
Provider ID: 206360
Provider Gender: Male
License Number: A68124
NPI: 1396715991
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619)
D2. 初級保健名錄

515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OPHTHALMOLOGY
SHAW, BLAKE
Provider ID: 206363
Provider Gender: Male
License Number: G61394
NPI: 1649206541
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:45PM

OTOLARYNGOLOGY
ZABLIT, KARIM
Provider ID: 403583
Provider Gender: Male
License Number: A42127
NPI: 1083700538
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:45PM

OPHTHALMOLOGY
ZABLIT, KARIM
Provider ID: 403583
Provider Gender: Male
License Number: A42127
NPI: 1083700538
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:45PM

OTOLARYNGOLOGY
DAVIS, MORGAN
Provider ID: 206360
Provider Gender: Female
License Number: A181809
NPI: 1891359154
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY
DAVIS, MORGAN
Provider ID: 206360
Provider Gender: Female
License Number: A181809
NPI: 1891359154
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
D2. 初級保健名錄

Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OTOLARYNGOLOGY
YOUSEF, ANDREW
Provider ID: 206360
Provider Gender: Male
License Number: A186426
NPI: 1275152662
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
ABRAMSON, RACHEL
Provider ID: 185268
Provider Gender: Female
License Number: A104918
NPI: 1588707178
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM
D2. 初級保健名錄

PEDIATRICS
ABRAMSON, RACHEL
Provider ID: 185268
Provider Gender: Female
License Number: A104918
NPI: 1588707178

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RACY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR
Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 280-4213
After Hours Phone: (619) 280-4213
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS
ADJAN, ROULA
Provider ID: 185268
Provider Gender: Female
License Number: A81682
NPI: 1992847263

Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Board Certified Specialty: No

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
Fax: (619) 749-5480
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS
ADLOUNI, LOUBABA
Provider ID: 230441
Provider Gender: Female
NPI: 1669443685

Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No

16918 DOVE CANYON RD
STE 200
SAN DIEGO, CA 92127
Phone: (858) 924-1960
Fax: (858) 924-1964
After Hours Phone: (858) 924-1960
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

PEDIATRICS
ANDREE, GREGOR
Provider ID: 482070
Provider Gender: Male
License Number: A72833
D2. 初級保健名錄

**PEDIATRICS**

**ANDREE, GREGOR**
Provider ID: 233532
Provider Gender: Male
License Number: A72833
NPI: 1467436063
- Provider English Spoken: Y
- Provider Language(s)
  - Spoken: German, Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 7011 LINDA VISTA RD
  SAN DIEGO, CA 92111
  - Phone: (858) 810-8700
  - After Hours Phone: (858) 810-8700
  - Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M 8:30AM-5:30PM
    TU 8:30AM-9:00PM
    W-F 8:30AM-5:30PM
    SA 9:00AM-4:00PM

**PEDIATRICS**

**ARCHAMBAULT, CHRISTIAN**
Provider ID: 5589
Provider Gender: Male
NPI: 1992776918
- Provider English Spoken: Y
- Provider Language(s)
  - Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, Rady CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, PALOMAR HEALTH, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, CHILDRENS HOSPITAL OF ORANGE COUNTY, PARADISE VALLEY

**PEDIATRICS**

**ANDREE, GREGOR**
Provider ID: 233532
Provider Gender: Male
License Number: A72833
NPI: 1467436063
- Provider English Spoken: Y
- Provider Language(s)
  - Spoken: German, Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 4305 UNIVERSITY AVE STE 150
  SAN DIEGO, CA 92105
  - Phone: (619) 280-2058
  - After Hours Phone: (619) 280-2058
  - Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\22
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M 8:30AM-5:30PM
    TU 8:30AM-9:00PM
    W-F 8:30AM-5:30PM
    SA 9:00AM-4:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
16918 DOVE CANYON RD STE 200
SAN DIEGO, CA 92127
Phone: (858) 924-1960
Fax: (858) 924-1964
After Hours Phone: (858) 924-1960
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
AWDYKOVYCH, MARTA
Provider ID: 206360
Provider Gender: Female
License Number: A44027
NPI: 1447265137
Provider English Spoken: Y
Provider Language(s)
  Spoken: Chinese, French, Spanish, Ukrainian
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
AYSON, NICOLE
Provider ID: 417429
Provider Gender: Female
License Number: A128091
NPI: 1013278704
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO
Board Certified Specialty: No
1550 BROADWAY STE 2 SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
D2. 初級保健名錄

N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

AZIMI, AYSUN
Provider ID: 317194
Provider Gender: Female
NPI: 1710246160
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP CHULA VISTA MED CTR, COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CLOVIS COMMUNITY HOSPITAL, CLOVIS COMMUNITY HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

BAJWA, MANDEEP
Provider ID: 416831
Provider Gender: Male
License Number: A186551
NPI: 1720615867
Provider English Spoken: Y
Cultural Competency: No
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS

BAJWA, MANDEEP
Provider ID: 416831
Provider Gender: Male
License Number: A186551
NPI: 1720615867
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS

BONSU, BEMA
Provider ID: 227409
Provider Gender: Male
License Number: C55180
NPI: 1932106986
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

BONSU, BEMA
Provider ID: 227409
Provider Gender: Male
License Number: C55180
NPI: 1932106986
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Board Certified Specialty: No
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

BONSU, BEMA
Provider ID: 227409
Provider Gender: Male
License Number: C55180
D2. 初級保健名錄

NPI: 1932106986
/provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND  
Board Certified Specialty: No  
3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: https://www.syhealth.org/locations  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
/provider Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
CABARLO, JEHRI
Provider ID: 206360  
Provider Gender: Male  
License Number: 20A8516  
NPI: 1770661340  
/provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Board Certified Specialty: No  
1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300  
Website: www.fhcsd.org  
Email: dalvarado@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
/provider Accessibility: CONTACT PROVIDER

PEDIATRICS
BOWERS, JESSIE  
Provider ID: 394841  
Provider Gender: Female  
NPI: 1730594235  
/provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
12036 SCRIPPS HIGHLANDS DR STE 102  
SAN DIEGO, CA 92131  
Phone: (858) 566-4444  
Fax: (858) 566-3321  
After Hours Phone: (858) 566-4444  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
/provider Accessibility: CONTACT PROVIDER

PEDIATRICS
CABARLO, JEHRI
Provider ID: 206360  
Provider Gender: Male  
License Number: 20A8516  
NPI: 1770661340  
/provider English Spoken: Y  
Provider Language(s) Spoken: French  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO  
Board Certified Specialty: Yes  
550 WASHINGTON ST STE 300  
SAN DIEGO, CA 92103  
Phone: (619) 297-5437  
Fax: (619) 297-4567

1424
D2. 初級保健名錄

- After Hours Phone: (619) 297-5437  
  Website: N/A  
  Medi-Cal Open Panel: Yes  
  Min/Max Age: 0\19  
  American Sign Language (ASL): N  
  Accessibility: CONTACT PROVIDER  
  Hours: M-TH 8:00AM-8:30PM  
  F 8:00AM-5:00PM  
  SA 8:00AM-2:00PM

**PEDIATRICS**

**CASTELNOVI, CLAUDIA**  
Provider ID: 185268  
Provider Gender: Female  
License Number: A111170  
NPI: 1417279324  
Provider English Spoken: Y  
Provider Language(s) Spoken: French, Italian, Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
Phone: (619) 255-9155  
After Hours Phone: (619) 255-9155  
Website: www.lamaestra.org  
Email: aschmaltz@lamaestra.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  

**PEDIATRICS**

**CHEN, JENNIFER**  
Provider ID: 206363  
Provider Gender: Female  
License Number: A141057  
NPI: 1255785150  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Board Certified Specialty: No  
4725 MARKET ST  
SAN DIEGO, CA 92102  
Phone: (619) 515-2560  
After Hours Phone: (619) 515-2560  
Website: www.fhcsd.org  
Email: nancyl@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CHEN, EILEEN
Provider ID: 606456
Provider Gender: Female
NPI: 1932660966
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
7910 FROST ST STE 400
SAN DIEGO, CA 92123
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
CONE, STEPHANIE
Provider ID: 185268
Provider Gender: Female
License Number: A123929
NPI: 1437444858
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-7:00PM

MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9154
After Hours Phone: (619) 255-9154
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDIATRICS
CORDES, WILLIAM
Provider ID: 206360
Provider Gender: Male
License Number: 20A15743
NPI: 1174942544
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-7:00PM
D2. 初級保健名錄

TU-TH 8:00AM-6:00PM  
F 8:00AM-5:30PM  
SA 8:00AM-5:00PM

PEDIATRICS  
CORDES, WILLIAM  
Provider ID: 206360  
Provider Gender: Male  
License Number: 20A15743  
NPI: 1174942544  
Provider English Spoken: Y  
Provider Language(s)  
   Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 810-8700  
After Hours Phone: (858) 810-8700  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M 8:30AM-5:30PM  
TU 8:30AM-8:30PM  
W-F 8:30AM-5:30PM  
SA 9:00AM-4:00PM

PEDIATRICS  
DIXON, SARAH  
Provider ID: 482070  
Provider Gender: Female  
License Number: A137415  
NPI: 1467751131  
Provider English Spoken: Y  
Provider Language(s)  
   Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (619) 515-2300  
After Hours Phone: (619) 515-2300  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M 8:30AM-5:30PM  
TU-TH 8:00AM-6:00PM  
F 8:00AM-5:30PM  
SA 8:00AM-5:00PM

PEDIATRICS  
FISHMAN, ELENA  
Provider ID: 524340  
Provider Gender: Female  
NPI: 1740249432  
Provider English Spoken: Y  
Provider Language(s)  
   Spoken: Russian  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL  
Board Certified Specialty: No  
11943 EL CAMINO REAL STE 210  
SAN DIEGO, CA 92130  
Phone: (858) 793-1011  
Fax: (858) 793-1035  
After Hours Phone: (858) 793-1011  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

**Hours**: M-F 8:00AM-5:00PM

**PEDIATRICS**

**FORTUNE, ERIN**

Provider ID: 206360  
Provider Gender: Male  
License Number: A95577  
NPI: 1801088422

- Provider English Spoken: Y  
- Provider Language(s): Spanish  
- Cultural Competency: N  
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL  
- Board Certified Specialty: No  
- Address: 1809 NATIONAL AVE, SAN DIEGO, CA 92113  
- Phone: (619) 515-2300  
- After Hours Phone: (619) 515-2300  
- Website: www.fhcsd.org  
- Medi-Cal Open Panel: Yes  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 9:00AM-5:00PM

**PEDIATRICS**

**FORTUNE, ERIN**

Provider ID: 416831  
Provider Gender: Male  
License Number: A95577  
NPI: 1801088422

- Provider English Spoken: Y  
- Provider Language(s): Spanish  
- Cultural Competency: N  
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL  
- Board Certified Specialty: No  
- Address: 3514 30TH ST, SAN DIEGO, CA 92104  
- Phone: (619) 515-2424  
- After Hours Phone: (619) 515-2424  
- Website: www.fhcsd.org  
- Medi-Cal Open Panel: Yes  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER

**PEDIATRICS**

**FRIEDMAN, JAIME**

Provider ID: 230500  
Provider Gender: Female  
NPI: 1144297961

- Provider English Spoken: Y  
- Provider Language(s): Spanish  
- Cultural Competency: N  
- Hospital Affiliation: RADY  
- Address: 1428  
- Phone: (619) 515-2424  
- After Hours Phone: (619) 515-2424  
- Website: www.fhcsd.org  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0-18  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER
CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH
Board Certified Specialty: No
16918 DOVE CANYON RD
STE 200
SAN DIEGO, CA 92127
Phone: (858) 924-1960
Fax: (858) 924-1964
After Hours Phone: (858) 924-1960
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
GOGGIN, SAMANTHA
Provider ID: 185268
Provider Gender: Female
License Number: A163693
NPI: 1023506367
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9154
After Hours Phone: (619) 255-9154
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
GRAY, SARAH
Provider ID: 206360
Provider Gender: Female
License Number: A151631
NPI: 1508210311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

1429
D2. 初級保健名錄

Provider English Spoken: Y
Provider Language(s)
  Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Board Certified Specialty: No
1809 National Ave
San Diego, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
HANSEN, JOHN
Provider ID: 318919
Provider Gender: Male
NPI: 1780655621
Provider English Spoken: Y
Provider Language(s)
  Spoken: Danish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Sharp Memorial Hospital, Scripps Mercy Hospital Chula Vista, Sharp Mary Birch Hospital for Women and Newborns
Board Certified Specialty: No
7910 Frost St Ste 400
San Diego, CA 92123
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
HENDERSON, TREVOR
Provider ID: 58111
Provider Gender: Male
NPI: 1356449425
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Grossmont Hospital, Sharp Mary Birch Hospital for Women and Newborns, Rady Children's Hospital San Diego, Alvarado Hospital LLC
Board Certified Specialty: No
6699 Alvarado Rd Ste 2200
San Diego, CA 92120
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619) 265-3400
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL):
D2. 初級保健名錄

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM

PEDIATRICS
HIBBS, NICOLE
Provider ID: 143979
Provider Gender: Female
NPI: 1164627832
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RAYD CHILDREN'S HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
Phone: (619) 297-5437
Fax: (619) 297-4567
After Hours Phone: (619) 297-5437
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS
HOANG, VY
Provider ID: 161902
Provider Gender: Female
NPI: 1649575135
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RAYD CHILDREN'S HOSPITAL SAN DIEGO
Board Certified Specialty: No
6699 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619) 265-3400
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
HORMOZDYARAN, SANAYA
Provider ID: 612398
Provider Gender: Female
NPI: 1750887634
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
2790 TRUXTUN RD STE 120A
SAN DIEGO, CA 92106
Phone: (619) 222-1253
Fax: (619) 222-1276
After Hours Phone: (619) 222-1253
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
JORDAN, JAMIE
Provider ID: 237831
Provider Gender: Female
NPI: 1275762833
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RAYD CHILDREN'S HOSPITAL SAN DIEGO
Board Certified Specialty: No
12036 SCRIPPS HIGHLANDS DR STE 102
SAN DIEGO, CA 92131
Phone: (858) 566-4444
Fax: (858) 566-3321
After Hours Phone: (858) 566-4444
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
JUAREZ, PATRICIA
D2. 初級保健名錄

Provider ID: 317641
Provider Gender: Female
NPI: 1205807229
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND
Board Certified Specialty: No
7910 FROST ST STE 400
SAN DIEGO, CA 92123
- Phone: (858) 495-0500
- Fax: (858) 560-4279
- After Hours Phone: (858) 495-0500
- Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
KARMAKAR, KANKA
Provider ID: 417101
Provider Gender: Female
License Number: C54941
NPI: 1972536654
- Provider English Spoken: Y
- Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Board Certified Specialty: No
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
- Phone: (844) 200-2426
- After Hours Phone: (844) 200-2426
- Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

PEDIATRICS
KESANAPALLI, DEEPTHI
Provider ID: 235069
Provider Gender: Female
NPI: 1487948584
- Provider English Spoken: Y
- Provider Language(s) Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
7910 FROST ST STE 335
SAN DIEGO, CA 92123
- Phone: (858) 576-8010
- Fax: (858) 576-7391
- After Hours Phone: (858) 576-8010
- Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M-TH 8:30AM-6:00PM
F 8:30AM-0:00PM

PEDIATRICS
LAWRIE, ALISA
Provider ID: 660912
Provider Gender: Female
D2. 初級保健名錄

NPI: 1407847908
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SHARP MEMORIAL HOSPITAL
- Board Certified Specialty: No
- 550 WASHINGTON ST STE 300
  SAN DIEGO, CA 92103
- Phone: (619) 297-4567
- After Hours Phone: (619) 297-4567
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PEDiatrics
LIU, JESICA
- Provider ID: 206363
- Provider Gender: Female
- License Number: A166312
- NPI: 1184157620
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 4725 MARKET ST
  SAN DIEGO, CA 92102
- Phone: (619) 515-2560
- After Hours Phone: (619) 515-2560
- Website: www.fhcsd.org
- Email: nancyl@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PEDiatrics
LOPER, KAREN
- Provider ID: 490610
- Provider Gender: Female
- License Number: A61687
- NPI: 1619908936
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
- Board Certified Specialty: No
- 1809 NATIONAL AVE
  SAN DIEGO, CA 92113
- Phone: (619) 515-2300
- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
PEDIATRICS
LUJAN, ARLEEN
Provider ID: 206360
Provider Gender: Female
License Number: A61687
NPI: 1760412431
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
MAHENDRAN, SRIVIDYA
Provider ID: 482070
Provider Gender: Female
License Number: A92173
NPI: 1487843454
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
MANRIQUEZ-CASTILLO, ERENDIRA
Provider ID: 185268
Provider Gender: Female
License Number: A75533
NPI: 1356397418
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PEDiatrics
MARTINEZ ANDREE, INGRID
Provider ID: 319049
Provider Gender: Female
NPI: 1205807203
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego, Sharp Memorial Hospital
Board Certified Specialty: No
7910 Frost St Ste 400
San Diego, CA 92123
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDiatrics
PARK, TARI
Provider ID: 237711
Provider Gender: Female
NPI: 1285669085
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: Sharp Mary Birch Hosp for Women and Newborns, Rady Childrens Hospital San Diego
Board Certified Specialty: No
12036 Scripps Highlands Dr Ste 102
San Diego, CA 92131
Phone: (858) 566-4444
Fax: (858) 566-3321
After Hours Phone: (858) 566-4444
Website: N/A
Medi-Cal Open Panel: Yes
D2. 初級保健名錄

Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
PARKER, SHERINE
Provider ID: 206360
Provider Gender: Female
License Number: G81658
NPI: 1477626513
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GLENDALE ADVENTIST MED CTR,
GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
 Phone: (619) 515-2300
 After Hours Phone: (619) 515-2300
 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
PAVLOVICH, WENDY
Provider ID: 416831
Provider Gender: Female
License Number: A126181
NPI: 1740467299
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-7:00PM
TU-TH 8:30AM-6:00PM
F 8:30AM-5:30PM
SA 8:30AM-5:00PM

PEDIATRICS
PAVLOVICH, WENDY
Provider ID: 416831
Provider Gender: Female
License Number: A126181
NPI: 1740467299
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
 Phone: (619) 515-2424
 After Hours Phone: (619) 515-2424
 Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-7:00PM
TU-TH 8:30AM-6:00PM
F 8:30AM-5:30PM
SA 8:30AM-5:00PM

1436
D2. 初級保健名錄

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

PEDIATRICS
POWELL, STEPHANIE
Provider ID: 319033
Provider Gender: Female
NPI: 1720059744
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

PEDIATRICS
PRESKILL, CATALINA
Provider ID: 403583
Provider Gender: Female
License Number: G29879
NPI: 1598088759
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
RODRIGUEZ, JAVIER
Provider ID: 185268
Provider Gender: Male
License Number: A82639
NPI: 1013059385
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org

MEDICAL SERVICES
Their PCP's doctor's office may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from the mental health service provider to be covered.

For online access to the mental health service provider list, please visit blueshieldca.com/fad.
D2. 初級保健名錄

SAN DIEGO, CA 92105
☎ Phone: (619) 255-9155
☎ After Hours Phone: (619) 255-9155
🌐 Website: www.lamaestra.org
✉ Email: aschmaltz@lamaestra.org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
✎ Accessibility: CONTACT PROVIDER

**PEDIATRICS**

**RODRIGUEZ, ALDO**

Provider ID: 451167
Provider Gender: Male
License Number: A134995
NPI: 1508209651

.provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

950 S EUCLID AVE
SAN DIEGO, CA 92114
☎ Phone: (619) 662-4100
☎ After Hours Phone: (619) 662-4100
🌐 Website: www.syhealth.org/clinics/king-chavez-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
✎ Accessibility: CONTACT PROVIDER

**PEDIATRICS**

**SAMPATH, SRIVIDYA**

Provider ID: 416831
Provider Gender: Female
License Number: A132576
NPI: 1275892754

.provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

3514 30TH ST
SAN DIEGO, CA 92104
SEBSO, JODI
Provider ID: 416831
Provider Gender: Female
License Number: A103099
NPI: 1538484316
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

SEBSO, JODI
Provider ID: 416831
Provider Gender: Female
License Number: A103099
NPI: 1538484316
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
3514 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

SEBSO, JODI
Provider ID: 206360
Provider Gender: Female
License Number: A103099
NPI: 1538484316
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

PEDIATRICS
D2. 初級保健名錄

Provider ID: 206360
Provider Gender: Female
License Number: A103099
NPI: 1538484316
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
- 292 EUCLID AVE STE 220
  SAN DIEGO, CA 92114
- Phone: (619) 262-8624
- Fax: (619) 262-6639
- After Hours Phone: (619) 262-8624
- Website: N/A
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM

PEDIATRICS

SHETH, HSMUKH
Provider ID: 451167
Provider Gender: Male
License Number: A45942
NPI: 1396812236
- Provider English Spoken: Y
- Provider Language(s): Gujarati, Hindi, Urdu
- Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
- 950 S EUCLID AVE
  SAN DIEGO, CA 92114
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org/clinics/king-chavez-health-center
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PEDIATRICS

SHIAU, NANCY
Provider ID: 40852
Provider Gender: Female
NPI: 1750352779
D2. 初級保健名錄

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, RAY CHILDREN’S HOSPITAL SAN DIEGO, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNs, ALVARADO HOSP MED CTR
Board Certified Specialty: No
6699 ALVARADO RD STE 2200
SAN DIEGO, CA 92120
Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619) 265-3400
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
SPITZER, MARSHA
Provider ID: 417429
Provider Gender: Female
License Number: A76785
NPI: 1851323315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PEDIATRICS
SPITZER, MARSHA
Provider ID: 206360
Provider Gender: Female
License Number: A76785
NPI: 1851323315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SPITZER, MARSHA
Provider ID: 206360
Provider Gender: Female
License Number: A76785
NPI: 1851323315
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SPITZER, MARSHA
Provider ID: 402851
Provider Gender: Female
License Number: A76785
NPI: 1851323315
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
STUMP, CHARI
Provider ID: 662343
Provider Gender: Female
NPI: 1932593506
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Phone: (858) 793-1011
After Hours Phone: (858) 793-1011
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SULEIMAN QAFITI, KHAWLA
Provider ID: 7910 FROST ST STE 400
SAN DIEGO, CA 92123
Phone: (858) 495-0500
Fax: (858) 560-4279
After Hours Phone: (858) 495-0500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SUBRAMANIAN, RAMA
Provider ID: 11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130
Phone: (858) 793-1011
Fax: (858) 793-1035
After Hours Phone: (858) 793-1011
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SULEIMAN QAFITI, KHAWLA
D2. 初級保健名錄

Provider ID: 416831
Provider Gender: Female
License Number: A51318
NPI: 1659303121
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS
TAMAYO, MAITHE
Provider ID: 356145
Provider Gender: Female
License Number: A80504
NPI: 1487748430
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Phone: (619) 515-2435
After Hours Phone: (619) 515-2435
Website: N/A
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SULEIMAN QAFITI, KHAWLA
Provider ID: 416831
Provider Gender: Female
License Number: A51318
NPI: 1659303121
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM

PEDIATRICS
TAMAYO, MAITHE
Provider ID: 356145
Provider Gender: Female
License Number: A80504
NPI: 1487748430
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Phone: (619) 515-2435
After Hours Phone: (619) 515-2435
Website: N/A
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
TAMAYO, MAITHE
Provider ID: 206360
Provider Gender: Female
License Number: A80504
NPI: 1487748430
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
Phone: (619) 515-2435
After Hours Phone: (619) 515-2435
Website: N/A
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
📍 1809 NATIONAL AVE
SAN DIEGO, CA 92113
📞 Phone: (619) 515-2300
📞 After Hours Phone: (619) 515-2300
🌐 Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
📍 Accessibility: CONTACT PROVIDER

PEDIATRICS
TAMAYO, MAITHE
Provider ID: 206360
Provider Gender: Female
License Number: A80504
NPI: 1487748430
حذر Provider English Spoken: Y
حذر Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
📍 11943 EL CAMINO REAL STE 210
SAN DIEGO, CA 92130
📞 Phone: (858) 793-1011
📞 Fax: (858) 793-1035
📞 After Hours Phone: (858) 793-1011
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
📍 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
WASSON, MINA
Provider ID: 524333
Provider Gender: Female
NPI: 1366753022
حذر Provider English Spoken: Y
حذر Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
📍 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
📞 Phone: (619) 262-8624
📞 Fax: (619) 262-6639
📞 After Hours Phone: (619) 262-8624
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
📍 Accessibility: CONTACT PROVIDER

PEDIATRICS
WATERS, ELIZABETH
Provider ID: 153090
Provider Gender: Female
NPI: 1730477621
حذر Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
📍 292 EUCLID AVE STE 220
SAN DIEGO, CA 92114
📞 Phone: (619) 262-8624
📞 After Hours Phone: (619) 262-8624
🌐 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
📍 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

1444
D2. 初級保健名錄

Phone: (619) 265-3400
Fax: (619) 265-3407
After Hours Phone: (619) 265-3400
Website: N/A

Af er Hours Phone: (619) 265-3400
Website: N/A

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:30AM-0:00PM

PEDIATRICS
WONG, YOLANDA
Provider ID: 233532
Provider Gender: Female
License Number: A94449
NPI: 1851599872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
After Hours Phone: (619) 280-2058
Website: www.sdfigurecare .org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
WONG, YOLANDA
Provider ID: 482070
Provider Gender: Female
License Number: A94449
NPI: 1851599872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfigurecare .org

Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
WONG, YOLANDA
Provider ID: 482070
Provider Gender: Female
License Number: A94449
NPI: 1851599872
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
After Hours Phone: (858) 810-8700
Website: www.sdfigurecare .org

1445
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-9:00PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PEDIATRICS
ZAHEER, AARON
Provider ID: 482070
Provider Gender: Male
License Number: A61238
NPI: 1902882301
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Persian, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 After Hours Phone: (858) 810-8700
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PEDIATRICS
ZAHEER, AARON
Provider ID: 233532
Provider Gender: Male
License Number: A61238
NPI: 1902882301
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Persian, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No

4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 After Hours Phone: (619) 280-2058
 Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\22
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PEDIATRICS
ZANDKARIMI, FARIBA
Provider ID: 206360
Provider Gender: Female
License Number: A46161
NPI: 1356373674
- Provider English Spoken: Y
- Provider Language(s) Spoken: Farsi, Persian, Spanish
- Cultural Competency: N
- Hospital Affiliation: MERCY GENERAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, UCSD MEDICAL CTR
Board Certified Specialty: No
- 1809 NATIONAL AVE SAN DIEGO, CA 92113
- Phone: (619) 515-2300
- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0 \( \text{to} \) 150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
ALVARADO, EDMUND
Provider ID: 419529
Provider Gender: Male
License Number: PA20888
NPI: 1720303340
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 2325 COMMERCIAL ST STE 1400 SAN DIEGO, CA 92113
- Phone: (619) 515-2422
- After Hours Phone: (619) 515-2422
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0 \( \text{to} \) 150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
ARMENTA, JORGE
Provider ID: 185268
Provider Gender: Male
License Number: PA20888
NPI: 1720303340
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 2325 COMMERCIAL ST STE 1400 SAN DIEGO, CA 92113
- Phone: (619) 515-2422
- After Hours Phone: (619) 515-2422
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0 \( \text{to} \) 150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

"您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad"
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT
BATISTA, OSVALDO
Provider ID: 206360
Provider Gender: Male
License Number: PA17864
NPI: 1245349224
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
ARMENTA, JORGE
Provider ID: 185268
Provider Gender: Male
License Number: PA13694
NPI: 1346382611
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org

PHYSICIANS ASSISTANT
CASTILLO, PATRICIA
Provider ID: 206362
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
CASTILLO, PATRICIA
D2. 初級保健名錄

Provider ID: 206362
Provider Gender: Female
License Number: PA17220
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
CHAN, TIFFANY
Provider ID: 206360
Provider Gender: Female
License Number: PA23258
NPI: 1790111607
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
CONTRERAS, LORETTA
Provider ID: 403583
Provider Gender: Female
License Number: PA54617
NPI: 1679096341
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
DOLMETSCH, JEANETTE
Provider ID: 417987
Provider Gender: Female
License Number: PA58905
NPI: 1164941456
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1449
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Website: www.fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM

PHYSICIANS ASSISTANT
CONTRERAS, LORETTA
Provider ID: 403583
Provider Gender: Female
License Number: PA54617
NPI: 1679096341
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU-W 8:30AM-5:00PM
TH 8:30AM-9:00PM
F 8:30AM-5:00PM
D2. 初級保健名錄

- **Provider ID:** 417987
- **Provider Gender:** Female
- **License Number:** PA59481
- **NPI:** 1093136426
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: French, Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

**PHYSICIANS ASSISTANT**

**DOLMETSCH, JEANETTE**

- **Provider ID:** 417987
- **Provider Gender:** Female
- **License Number:** PA58905
- **NPI:** 1164941456
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: French, Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

**PHYSICIANS ASSISTANT**

**DOLMETSCH, JEANETTE**

- **Provider ID:** 417987
- **Provider Gender:** Female
- **License Number:** PA58905
- **NPI:** 1164941456
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: French, Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

**GARCIA, DEANA**

- **Provider ID:** 416831
- **Provider Gender:** Female
- **License Number:** PA21042
- **NPI:** 1447567995
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: French, Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Min/Max Age:** 0\18
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

**PHYSICIANS ASSISTANT**

**GARCIA, DEANA**

- **Provider ID:** 416831
- **Provider Gender:** Female
- **License Number:** PA21042
- **NPI:** 1447567995
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: French, Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Min/Max Age:** 0\18
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

**GARCIA, DEANA**

- **Provider ID:** 416831
- **Provider Gender:** Female
- **License Number:** PA21042
- **NPI:** 1447567995
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: French, Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Min/Max Age:** 0\18
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

**PHYSICIANS ASSISTANT**

**GARCIA, DEANA**

- **Provider ID:** 416831
- **Provider Gender:** Female
- **License Number:** PA21042
- **NPI:** 1447567995
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: French, Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Min/Max Age:** 0\18
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
D2. 初級保健名錄

Email: jenanm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
HOXMEIER, KRISTA
Provider ID: 418142
Provider Gender: Female
License Number: PA58505
NPI: 1104203454
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 5160 FEDERAL BLVD
 SAN DIEGO, CA 92105
 Phone: (619) 515-2454
 After Hours Phone: (619) 515-2454
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
HOXMEIER, KRISTA
Provider ID: 206363
Provider Gender: Female
License Number: PA58505
NPI: 1104203454
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Board Certified Specialty: No
 4725 MARKET ST
 SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
 Email: nancyl@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
LANDIS, SARAH
Provider ID: 417782
Provider Gender: Female
License Number: PA58826
NPI: 1144733676
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101
 Phone: (619) 515-2430
 After Hours Phone: (619) 515-2430
 Website: www.fhcsd.org
D2. 初級保健名錄

Email: jinah@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
LANDIS, SARAH
Provider ID: 417782
Provider Gender: Female
License Number: PA58826
NPI: 1144733676
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
 Board Certified Specialty: No
 1250 6TH AVE STE 100
 SAN DIEGO, CA 92101
 Phone: (619) 515-2430
 After Hours Phone: (619) 515-2430
 Email: jinah@fhcsd.org
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
LAPINA, LORI
Provider ID: 417937
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4094 4TH AVE
 SAN DIEGO, CA 92103
 Phone: (619) 515-2545
 After Hours Phone: (619) 515-2545
 Website: www.fhcsd.org
 Email: fabianm@fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
LEON, FLOR
Provider ID: 356145
Provider Gender: Female
License Number: PA53788
NPI: 1902358237
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 2391 ISLAND AVE
 SAN DIEGO, CA 92102
 Phone: (619) 515-2435
 After Hours Phone: (619) 515-2435
 Email: dalvarado@fhcsd.org
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N

PHYSICIANS ASSISTANT
LAPINA, LORI
Provider ID: 419529
Provider Gender: Female
License Number: PA23231
NPI: 1245670413
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 2325 COMMERCIAL ST STE 1400
 SAN DIEGO, CA 92113
 Phone: (619) 515-2422
 After Hours Phone: (619) 515-2422
 Email: dalvarado@fhcsd.org
 Website: www.fhcsd.org
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\150
 American Sign Language (ASL): N

1452
D2. 初級保健名錄

PHYSICIANS ASSISTANT
LEON, FLOR
Provider ID: 419529
Provider Gender: Female
License Number: PA53788
NPI: 1902358237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
2325 COMMERCIAL ST STE 1400
SAN DIEGO, CA 92113
Phone: (619) 515-2422
After Hours Phone: (619) 515-2422
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
LEON, FLOR
Provider ID: 206360
Provider Gender: Female
License Number: PA53788
NPI: 1902358237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
LEON, FLOR
Provider ID: 356145
Provider Gender: Female
License Number: PA53788
NPI: 1902358237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
2391 ISLAND AVE
SAN DIEGO, CA 92102
Phone: (619) 515-2435
After Hours Phone: (619) 515-2435
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
LLOYD, MATTHEW
Provider ID: 417429
Provider Gender: Male
License Number: PA62752
NPI: 1487307369
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
PHYSICIANS ASSOCIATE
LOHNES, ELLIE
Provider ID: 417429
Provider Gender: Female
License Number: PA63071
NPI: 1902580426
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSOCIATE
LOPEZ, MARIO
Provider ID: 417987
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4874 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 515-2426
After Hours Phone: (619) 515-2426
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSOCIATE
LOPEZ, MARIO
Provider ID: 417937
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

D2. 初級保健名錄
D2. 初級保健名錄

PHYSICIANS ASSISTANT
LOPEZ, MARIO
Provider ID: 417937
Provider Gender: Male
License Number: PA21385
NPI: 1932335080
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
MARTINEZ MURGUIA, IRENE
Provider ID: 185268
Provider Gender: Female
License Number: PA20296
NPI: 1447492889
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
MERCER, KELLY
Provider ID: 185268
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT
MERCER, KELLY
Provider ID: 185268
Provider Gender: Female
License Number: PA21625
NPI: 1154609790
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
D2. 初級保健名錄

4060 FAIRMOUNT AVE
SAN DIEGO, CA 92105
Phone: (619) 255-9155
After Hours Phone: (619) 255-9155
Website: www.lamaestra.org
Email: aschmaltz@lamaestra.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT
MILLER, LAUREL
Provider ID: 206363
Provider Gender: Female
License Number: PA20378
NPI: 1598992133
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
NUNO, JOSE
Provider ID: 206360
Provider Gender: Male
License Number: PA15227
NPI: 1275543068
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
PENA, NICHOLAS
Provider ID: 206360
Provider Gender: Male
License Number: PA56636
NPI: 1083176077
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PHYSICIANS ASSISTANT
PENA, NICHOLAS
Provider ID: 206360
Provider Gender: Male
License Number: PA56636
NPI: 1083176077
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org

PHYSICIANS ASSISTANT
PHUNG, AIVI
Provider ID: 206046
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

PHYSICIANS ASSISTANT
PHUNG, AIVI
Provider ID: 206046
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org

PHYSICIANS ASSISTANT
PHUNG, AIVI
Provider ID: 206046
Provider Gender: Female
License Number: PA53902
NPI: 1639528110
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
Phone: (858) 279-0925
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1457
D2. 初級保健名錄

.Provider English Spoken: Y
.Provider Language(s) Spoken: Vietnamese
.Cultural Competency: N
.Board Certified Specialty: No

 Provider ID: 206363
.Provider Gender: Female
.License Number: PA60864
.NPI: 1225608722

.Accessibility: CONTACT PROVIDER
.Hours: M 8:00AM-5:00PM
.TU 8:00AM-8:00PM
.W-F 8:00AM-5:00PM
.SA: 9:00AM-1:00PM

PHYSICIANS ASSISTANT
POLLEY, SHANNON

.Provider ID: 206363
.Provider Gender: Female
.License Number: PA60864
.NPI: 1225608722

.Accessibility: CONTACT PROVIDER

4725 MARKET ST
SAN DIEGO, CA 92102
.Phone: (619) 515-2560
.After Hours Phone: (619) 515-2560
.Website: www.fhcsd.org
.Email: nancyl@fhcsd.org
.Medi-Cal Open Panel: Yes
.Min/Max Age: 0\150
.American Sign Language (ASL): N

PHYSICIANS ASSISTANT
QUICK, ELISABETH

.Provider ID: 206360
.Provider Gender: Female
.License Number: PA21591
.NPI: 1790055010

.Provider English Spoken: Y
.Provider Language(s) Spoken: Spanish
.Cultural Competency: N
.Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
.Phone: (619) 515-2300
.After Hours Phone: (619) 515-2300
.Website: www.fhcsd.org
.Email: dalvarado@fhcsd.org
.Medi-Cal Open Panel: Yes
.Min/Max Age: 0\150
.American Sign Language (ASL): N

PHYSICIANS ASSISTANT
RALL, EMILY

.Provider ID: 227409
.Provider Gender: Female
.License Number: PA52141
.NPI: 1407855828

.Provider English Spoken: Y
.Provider Language(s) Spoken: Spanish
.Cultural Competency: N
.Board Certified Specialty: No

1809 NATIONAL AVE
SAN DIEGO, CA 92113
.Phone: (619) 515-2300
.After Hours Phone: (619) 515-2300
.Website: www.fhcsd.org
.Email: dalvarado@fhcsd.org
.Medi-Cal Open Panel: Yes
.Min/Max Age: 0\150
.American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Your PCP's doctor group may have their own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from mental health service providers before being covered.

To access the mental health service provider list online, please visit blueshieldca.com/faad.
D2. 初級保健名錄

- Provider English Spoken: Y  
  Cultural Competency: N  
  Board Certified Specialty: No  
  3177 OCEAN VIEW BLVD  
  SAN DIEGO, CA 92113  
  Phone: (619) 662-4100  
  After Hours Phone: (619) 662-4100  
  Website: https://www.syhealth.org/locations  
  Medi-Cal Open Panel: Yes  
  Min/Max Age: 0\150  
  American Sign Language (ASL): N  
  Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
RALL, EMILY
Provider ID: 227409  
Provider Gender: Female  
License Number: PA52141  
NPI: 1407855828  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: https://www.syhealth.org/locations  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
RASMUSSEN, DALE
Provider ID: 417429  
Provider Gender: Male  
License Number: PA54022  
NPI: 1962880864  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: MERCY HOSPITAL OF FOLSOM  
Board Certified Specialty: No  
1550 BROADWAY STE 2  
SAN DIEGO, CA 92101  
Phone: (619) 515-2525  
After Hours Phone: (619) 515-2525  
Website: www.fhcsd.org  
Email: janeta@fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT
SHARPE, NORMA
Provider ID: 517403  
Provider Gender: Female  
License Number: PA20490  
NPI: 1619100237  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
316 25TH ST  
SAN DIEGO, CA 92102  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\120  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
SHARPE, NORMA
Provider ID: 517403  
Provider Gender: Female  
License Number: PA20490  
NPI: 1619100237  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
316 25TH ST  
SAN DIEGO, CA 92102  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\120  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

SAN DIEGO, CA 92102
Provider: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
TOMASZEWSKI, DEBRA
Provider ID: 206363
Provider Gender: Female
License Number: MT2061555
NPI: 1215264452
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
TOMASZEWSKI, DEBRA
Provider ID: 206363
Provider Gender: Female
License Number: MT2061555
NPI: 1215264452
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
TOMASZEWSKI, DEBRA
Provider ID: 206363
Provider Gender: Female
License Number: PA58081
NPI: 1215264452
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
TOMASZEWSKI, DEBRA
Provider ID: 206360
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
TOMASZEWSKI, DEBRA
Provider ID: 206360
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
D2. 初級保健名錄

PHYSICIANS ASSISTANT
TURNER, SHEREENA
Provider ID: 206360
Provider Gender: Female
License Number: PA20396
NPI: 1992934988
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
YOUNG-PEN, TONI
Provider ID: 206362
Provider Gender: Female
License Number: PA18746
NPI: 1932297595
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish,
Vietnamese
Cultural Competency: N
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-2:00PM

PHYSICIANS ASSISTANT
UDOH, EKAETE
Provider ID: 418535
Provider Gender: Male
License Number: PA19664
NPI: 1841472776
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
9995 CARMEL MOUNTAIN RD STE B10 AND B11
SAN DIEGO, CA 92129
Phone: (844) 200-2426
After Hours Phone: (844) 200-2426
Website: www.operationsamahan.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM

PHYSICIANS ASSISTANT
YOUNG-PEN, TONI
Provider ID: 233597
Provider Gender: Female
License Number: PA18746
NPI: 1932297595
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish,
Vietnamese
Cultural Competency: N
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
After Hours Phone: (619) 563-0250
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
D2. 初級保健名錄

- **After Hours Phone:** (619) 515-2424
- **Website:** www.fhcsd.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\(\text{-}150\)
  - American Sign Language (ASL): N
- **Accessibility:** CONTACT PROVIDER

**PHYSICIANS ASSISTANT**

**YOUNG-PEN, TONI**

- Provider ID: 233597
- Provider Gender: Female
- License Number: PA18746
- NPI: 1932297595
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish, Vietnamese
- Cultural Competency: N
- Board Certified Specialty: No

**PODIATRIST**

**JUAREZ, LETICIA**

- Provider ID: 206360
- Provider Gender: Female
- License Number: DPM5661
- NPI: 1508393778
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No

**PODIATRIST**

**LE, DIANA**

- Provider ID: 206360
- Provider Gender: Female
- License Number: DPM5734
- NPI: 1184112864
- Provider English Spoken: Y
- Provider Language(s) Spoken: Vietnamese
- Cultural Competency: N

- **Hours:** M-F 8:00AM-5:00PM
  - SA 8:00AM-2:00PM
D2. 初級保健名錄

PODIATRIST
LE, DIANA
Provider ID: 206363
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
Provider English Spoken: Y
Provider Language(s): Vietnamese
American Sign Language (ASL): N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR
Board Certified Specialty: No

PODIATRIST
LE, DIANA
Provider ID: 206363
Provider Gender: Female
License Number: DPM5734
NPI: 1184112864
Provider English Spoken: Y
Provider Language(s): Vietnamese
American Sign Language (ASL): N
Hospital Affiliation: ANAHEIM REGIONAL MEDICAL CTR
Board Certified Specialty: No

PODIATRIST
SCHNEIDER, SARAH
Provider ID: 206360
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

PODIATRIST
SCHNEIDER, SARAH
Provider ID: 206360
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
D2. 初級保健名錄

PODIATRIST
SCHNEIDER, SARAH
Provider ID: 402851
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST
SCHNEIDER, SARAH
Provider ID: 417429
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST
SCHNEIDER, SARAH
Provider ID: 402851
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1550 BROADWAY STE 2
SAN DIEGO, CA 92101
Phone: (619) 515-2525
After Hours Phone: (619) 515-2525
Website: www.fhcsd.org
Email: janeta@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST
SCHNEIDER, SARAH
Provider ID: 417429
Provider Gender: Female
License Number: DPM4819
NPI: 1326282237
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3705 MISSION BLVD
SAN DIEGO, CA 92109
Phone: (619) 515-2444
After Hours Phone: (619) 515-2444
Website: www.fhcsd.org
Email: sabay@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE
GENERAL
HILL, LINDA
Provider ID: 206046
Provider Gender: Female
License Number: G41532
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s): Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
### MEDICAL CTR
| Board Certified Specialty: No | 6973 LINDA VISTA RD |
| John | SAN DIEGO, CA 92111 |
| Phone: (858) 279-0925 | After Hours Phone: (858) 279-0925 |
| Website: www.sdfamilycare.org | Medi-Cal Open Panel: Yes |
| Min/Max Age: 0\150 | American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER | Hours: M 8:30AM-5:30PM |
| Provider ID: 482070 | Provider English Spoken: Y |
| Provider Gender: Female | Provider Language(s) Spoken: French, Spanish |
| License Number: G41532 | Cultural Competency: N |
| NPI: 1467434811 | Hospital Affiliation: UCSD |
| Provider ID: 206046 | MEDICAL CTR |
| Board Certified Specialty: No | 6973 LINDA VISTA RD |
| Phone: (858) 279-0925 | After Hours Phone: (858) 279-0925 |
| Website: www.sdfamilycare.org | Medi-Cal Open Panel: Yes |
| Min/Max Age: 0\150 | American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER | Hours: M-F 8:30AM-5:30PM |
| Provider ID: 206046 | Provider English Spoken: Y |
| Provider Gender: Female | Provider Language(s) Spoken: French, Spanish |
| License Number: G41532 | Cultural Competency: N |
| NPI: 1467434811 | Hospital Affiliation: UCSD |
| Provider ID: 482070 | MEDICAL CTR |
| Board Certified Specialty: No | 6973 LINDA VISTA RD |
| Phone: (858) 279-0925 | After Hours Phone: (858) 279-0925 |
| Website: www.sdfamilycare.org | Medi-Cal Open Panel: Yes |
| Min/Max Age: 0\150 | American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER | Hours: M-F 8:30AM-5:30PM |
| Provider ID: 206046 | Provider English Spoken: Y |
| Provider Gender: Female | Provider Language(s) Spoken: French, Spanish |
| License Number: G41532 | Cultural Competency: N |
| NPI: 1467434811 | Hospital Affiliation: UCSD |
D2. 初級保健名錄

- PROVIDER
  - Hours: M 8:30AM-5:30PM
  - TU 8:30AM-9:00PM
  - W-F 8:30AM-5:30PM
  - SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE
GENERAL

HILL, LINDA
- Provider ID: 482070
- Provider Gender: Female
- License Number: G41532
- NPI: 1467434811
- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

RISSER, JOSEPH
- Provider ID: 482070
- Provider Gender: Male
- License Number: G70886
- NPI: 1952386765
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (858) 810-8700
- After Hours Phone: (858) 810-8700
- Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE
GENERAL

HILL, LINDA
- Provider ID: 482070
- Provider Gender: Female
- License Number: G41532
- NPI: 1467434811
- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

RISSER, JOSEPH
- Provider ID: 482070
- Provider Gender: Male
- License Number: G70886
- NPI: 1952386765
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (858) 810-8700
- After Hours Phone: (858) 810-8700
- Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE
GENERAL

HILL, LINDA
- Provider ID: 482070
- Provider Gender: Female
- License Number: G41532
- NPI: 1467434811
- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

RISSER, JOSEPH
- Provider ID: 482070
- Provider Gender: Male
- License Number: G70886
- NPI: 1952386765
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE
GENERAL

HILL, LINDA
- Provider ID: 482070
- Provider Gender: Female
- License Number: G41532
- NPI: 1467434811
- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

RISSER, JOSEPH
- Provider ID: 482070
- Provider Gender: Male
- License Number: G70886
- NPI: 1952386765
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE
GENERAL

HILL, LINDA
- Provider ID: 482070
- Provider Gender: Female
- License Number: G41532
- NPI: 1467434811
- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

RISSER, JOSEPH
- Provider ID: 482070
- Provider Gender: Male
- License Number: G70886
- NPI: 1952386765
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE
GENERAL

HILL, LINDA
- Provider ID: 482070
- Provider Gender: Female
- License Number: G41532
- NPI: 1467434811
- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

RISSER, JOSEPH
- Provider ID: 482070
- Provider Gender: Male
- License Number: G70886
- NPI: 1952386765
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE
GENERAL

HILL, LINDA
- Provider ID: 482070
- Provider Gender: Female
- License Number: G41532
- NPI: 1467434811
- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

RISSER, JOSEPH
- Provider ID: 482070
- Provider Gender: Male
- License Number: G70886
- NPI: 1952386765
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

PREVENTATIVE MEDICINE
GENERAL

HILL, LINDA
- Provider ID: 482070
- Provider Gender: Female
- License Number: G41532
- NPI: 1467434811
- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Board Certified Specialty: No
- Phone: (858) 279-0925
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org

RISSER, JOSEPH
- Provider ID: 482070
- Provider Gender: Male
- License Number: G70886
- NPI: 1952386765
- Provider English Spoken: Y
- Cultural Competency: N
D2. 初級保健名錄

PREVENTATIVE MEDICINE
GENERAL
RISSER, JOSEPH
Provider ID: 482070
Provider Gender: Male
License Number: G70886
NPI: 1952386765
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE
GENERAL
RISSER, JOSEPH
Provider ID: 206046
Provider Gender: Male
License Number: G70886
NPI: 1952386765
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: Yes
Hours: M-F 8:30AM-5:30PM
SA 9:00AM-4:00PM

PREVENTATIVE MEDICINE
GENERAL
ROMERO, CAMILA
Provider ID: 206046
Provider Gender: Female
License Number: A93812
NPI: 1508912130
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 279-0377
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE
GENERAL
ROMERO, CAMILA
Provider ID: 206046
Provider Gender: Female
License Number: A93812
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 279-0377
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE
GENERAL
ROMERO, CAMILA
Provider ID: 206046
Provider Gender: Female
License Number: A93812
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 279-0377
After Hours Phone: (858) 279-0925
Website: www.sdfamilycare.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
- Board Certified Specialty: No
- 6973 LINDA VISTA RD SAN DIEGO, CA 92111
- Phone: (858) 279-0925
- Fax: (858) 279-0377
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PREVENTATIVE MEDICINE

ROMERO, CAMILA
- Provider ID: 206046
- Provider Gender: Female
- License Number: A93812
- NPI: 1508912130
- Provider English Spoken: Y
- Provider Language(s): French, Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
- Board Certified Specialty: No
- 6973 LINDA VISTA RD SAN DIEGO, CA 92111
- Phone: (858) 279-0925
- Fax: (858) 279-0377
- After Hours Phone: (858) 279-0925
- Website: www.sdfamilycare.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL

THERAPIST

BLOCKER, NIRIT
- Provider ID: 206360
- Provider Gender: Female
- License Number: PT30272
- NPI: 1457689309
- Provider English Spoken: Y
- Provider Language(s): Hebrew
- Cultural Competency: N
- Board Certified Specialty: No
- 1809 NATIONAL AVE SAN DIEGO, CA 92113
- Phone: (619) 515-2300
- After Hours Phone: (619) 515-2300
- Website: www.fhcsd.org
- Email: dalvarado@fhcsd.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL

THERAPIST

BLOCKER, NIRIT
- Provider ID: 206360
- Provider Gender: Female
- License Number: PT30272
- NPI: 1457689309
- Provider English Spoken: Y
- Provider Language(s): Hebrew
- Cultural Competency: N
- Board Certified Specialty: No
- 1809 NATIONAL AVE SAN DIEGO, CA 92113
- Phone: (619) 515-2300
- After Hours Phone: (619)
D2. 初級保健名錄

515-2300
Provider: dalvarado@fhcsd.org
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0/150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST
CHAVARRIA, JESSICA
Provider ID: 417937
Provider Gender: Female
License Number: PT292351
NPI: 1407391808
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0/150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST
CONCORS, ANDREW
Provider ID: 417937
Provider Gender: Male
License Number: PT12930
NPI: 1578706743
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0/150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST
CUMMINGS, GEORGE
Provider ID: 417937
Provider Gender: Male
License Number: PT295173
NPI: 1497236384
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0/150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

- **Provider Language(s)**
  - Spoken: Spanish
  - Cultural Competency: N

- **Board Certified Specialty**: No

- **Address**:
  - 4094 4TH AVE
  - SAN DIEGO, CA 92103

- **Phone**: (619) 515-2545
  - After Hours Phone: (619) 515-2545

- **Website**: www.fhcsd.org
  - Email: fabianm@fhcsd.org

- **Medi-Cal Open Panel**: Yes

- **Min/Max Age**: 0\150

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

- **Accessibility**: CONTACT PROVIDER

---

**REGISTERED PHYSICAL THERAPIST**

**Dahms, Madeylnn**

- **Provider ID**: 206360
- **Provider Gender**: Female
- **License Number**: PT295463
- **NPI**: 1245712702

- **Provider English Spoken**: Y
- **Provider Language(s)**
  - Spoken: Sign Language

- **Cultural Competency**: N

- **Board Certified Specialty**: No

- **Address**:
  - 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113

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

- **Website**: www.fhcsd.org
  - Email: dalvarado@fhcsd.org

- **Medi-Cal Open Panel**: Yes

- **Min/Max Age**: 0\150

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

- **Accessibility**: CONTACT PROVIDER

---

**REGISTERED PHYSICAL THERAPIST**

**Cummings, George**

- **Provider ID**: 417937
- **Provider Gender**: Male
- **License Number**: PT295173
- **NPI**: 1497236384

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

- **Cultural Competency**: N

- **Board Certified Specialty**: No

- **Address**: 4094 4TH AVE
  - SAN DIEGO, CA 92103

- **Phone**: (619) 515-2545
  - After Hours Phone: (619) 515-2545

- **Website**: www.fhcsd.org
  - Email: fabianm@fhcsd.org

- **Medi-Cal Open Panel**: Yes

- **Min/Max Age**: 0\150

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

- **Accessibility**: CONTACT PROVIDER

---

**REGISTERED PHYSICAL THERAPIST**

**Dahms, Madeylnn**

- **Provider ID**: 206360
- **Provider Gender**: Female
- **License Number**: PT295463
- **NPI**: 1245712702

- **Provider English Spoken**: Y
- **Provider Language(s)**
  - Spoken: Sign Language

- **Cultural Competency**: N

- **Board Certified Specialty**: No

- **Address**: 1809 NATIONAL AVE
  - SAN DIEGO, CA 92113

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

- **Website**: www.fhcsd.org
  - Email: dalvarado@fhcsd.org

- **Medi-Cal Open Panel**: Yes

- **Min/Max Age**: 0\150

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

- **Accessibility**: CONTACT PROVIDER

---

**REGISTERED PHYSICAL THERAPIST**

**Fielding, Joseph**

- **Provider ID**: 417937
- **Provider Gender**: Male
- **License Number**: PT40975
- **NPI**: 1235577560

- **Provider English Spoken**: Y

- **Cultural Competency**: N

- **Board Certified Specialty**: No

- **Address**: 4094 4TH AVE
  - SAN DIEGO, CA 92103

- **Phone**: (619) 515-2545
  - After Hours Phone: (619) 515-2545

- **Website**: www.fhcsd.org
  - Email: fabianm@fhcsd.org

- **Medi-Cal Open Panel**: Yes

- **Min/Max Age**: 0\150

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

- **Accessibility**: CONTACT PROVIDER
Provider Gender: Male
License Number: PT40975
NPI: 1235577560
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
HAPKE, ELENA
Provider ID: 417937
Provider Gender: Female
License Number: PT292613
NPI: 1003354895
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
HERMES, MARY
Provider ID: 206360
Provider Gender: Female
License Number: PT24707
NPI: 1518028547
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
IRIZARRY, NICOLE
Provider ID: 206360
D2. 初級保健名錄

Provider Gender: Female
License Number: PT33914
NPI: 1003088063
▌ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
▌ Phone: (619) 515-2300
▌ After Hours Phone: (619) 515-2300
▌ Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
MAHONEY, KAITLYN
Provider ID: 417937
Provider Gender: Female
License Number: PT296559
NPI: 1114583176
▌ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
▌ Phone: (619) 515-2545
▌ After Hours Phone: (619) 515-2545
▌ Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

REGISTERED PHYSICAL THERAPIST
IRIZARRY, NICOLE
Provider ID: 206360
Provider Gender: Female
License Number: PT33914
NPI: 1003088063
▌ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
▌ Phone: (619) 515-2300
▌ After Hours Phone: (619) 515-2300
▌ Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
MAHONEY, KAITLYN
Provider ID: 417937
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
▌ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
▌ Phone: (619) 515-2545
▌ After Hours Phone: (619) 515-2545
▌ Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST
MIGNEA, DAVID
Provider ID: 417937
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
▌ Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
▌ Phone: (619) 515-2545
▌ After Hours Phone: (619) 515-2545
▌ Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER

D2. 初級保健名錄

Provider ID: 417937
Provider Gender: Male
License Number: PT293536
NPI: 1043736879
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

SCHMIDT, BRYAN
Provider ID: 417937
Provider Gender: Male
License Number: PT28061
NPI: 1780685032
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST

VAN DYKE, JASON
Provider ID: 417937
Provider Gender: Male
License Number: PT25155
NPI: 1487658720
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4094 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 515-2545
After Hours Phone: (619) 515-2545
Website: www.fhcsd.org
Email: fabianm@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL):
D2. 初級保健名錄

N
 Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-9:00PM
F 8:00AM-5:00PM

RHEUMATOLOGY
OGANDO, SHEENA
Provider ID: 206363
Provider Gender: Female
License Number: A142743
NPI: 1649564295
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: JOHN MUIR MEDICAL CENTER
WALNUT CREEK CAMPUS
Board Certified Specialty: No
 4725 MARKET ST
SAN DIEGO, CA 92102
 Phone: (619) 515-2560
 After Hours Phone: (619) 515-2560
 Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

RHEUMATOLOGY
REDDY, DANA
Provider ID: 403583
Provider Gender: Female
License Number: A115598
NPI: 1144538778
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL
HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
ENCINITAS
Board Certified Specialty: No
 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
 Phone: (619) 233-8500
 After Hours Phone: (619) 233-8500
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

RHEUMATOLOGY
REDDY, DANA
Provider ID: 403583
Provider Gender: Female
License Number: A115598
NPI: 1144538778
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
After Hours Phone: (619) 233-8500
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM

RHEUMATOLOGY
REDDY, DANA
Provider ID: 206360
Provider Gender: Female
License Number: SP27677
NPI: 1932680006
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
4725 MARKET ST
SAN DIEGO, CA 92102
Phone: (619) 515-2560
After Hours Phone: (619) 515-2560
Website: www.fhcsd.org
Email: nancyl@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

SPEECH PATHOLOGIST
WILLIAMS, JESSICA
Provider ID: 206360
Provider Gender: Female
License Number: SP27677
NPI: 1932680006
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SAN MARCOS
CERTIFIED NURSE PRACTITIONER
BINETTE, DONYA
Provider ID: 206426
Provider Gender: Female
License Number: NP95001653
NPI: 1427325166
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Website: www.fhcsd.org
Email: dalvarado@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
### D2. 初級保健名錄

- **Certified Nurse Practitioner**
  - **Binette, Donya**
    - Provider ID: 206426
    - Provider Gender: Female
    - License Number: NP95001653
    - NPI: 1427325166
    - Accessibility: CONTACT PROVIDER

- **Certified Nurse Practitioner**
  - **Binette, Donya**
    - Provider ID: 206426
    - Provider Gender: Female
    - License Number: NP95001653
    - NPI: 1427325166
    - Accessibility: CONTACT PROVIDER

- **Certified Nurse Practitioner**
  - **Binette, Donya**
    - Provider ID: 206426
    - Provider Gender: Female
    - License Number: NP95001653
    - NPI: 1427325166
    - Accessibility: CONTACT PROVIDER

---

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
DOAN, CHINH
Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
DOAN, CHINH
Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
DOAN, CHINH
Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
DOAN, CHINH
Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
DOAN, CHINH
Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
DOAN, CHINH
Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER

FODDA, RAMI
Provider ID: 614511
Provider Gender: Male
License Number: NP18788
NPI: 1164660452
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FODDA, RAMI
Provider ID: 614511
Provider Gender: Male
License Number: NP18788
NPI: 1164660452
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

DOAN, CHINH
Provider ID: 206426
Provider Gender: Female
License Number: NP18874
NPI: 1083845069
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FODDA, RAMI
Provider ID: 614511
Provider Gender: Male
License Number: NP18788
NPI: 1164660452
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER

FODDA, RAMI
Provider ID: 614511
Provider Gender: Male
License Number: NP18788
NPI: 1164660452
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Board Certified Specialty: No
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FODDA, RAMI
Provider ID: 614511
Provider Gender: Male

D2. 初級保健名錄

License Number: NP18788
NPI: 1164660452
- Provider English Spoken: Y
- Provider Language(s) Spoken: Arabic
- Cultural Competency: N
- Board Certified Specialty: No

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
- Phone: (760) 736-6767
- Fax: (760) 736-6744
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\1999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
FODDA, RAMI
Provider ID: 614511
Provider Gender: Male
License Number: NP18788
NPI: 1164660452
- Provider English Spoken: Y
- Provider Language(s) Spoken: Arabic
- Cultural Competency: N
- Board Certified Specialty: No

1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
- Phone: (760) 736-6767
- Fax: (760) 736-6744
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\1999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
FREEMAN, WANDA
Provider ID: 206426
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
- Provider English Spoken: Y
- Provider Language(s) Spoken: Arabic
- Cultural Competency: N
- Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

NPI: 1659504264
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
FREEMAN, WANDA
Provider ID: 206426
Provider Gender: Female
License Number: NP95003903
NPI: 1659504264
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
HENLEY, MEARA
Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
HENLEY, MEARA
Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
HENLEY, MEARA
Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
HENLEY, MEARA
Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
HENLEY, MEARA
Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
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CERTIFIED NURSE PRACTITIONER
HENLEY, MEARA
Provider ID: 206426
Provider Gender: Female
License Number: NP95002545
NPI: 1538319645
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
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Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
KOUSARI, JHALEH
Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
KOUSAHI, JHALEH
Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
- Provider English Spoken: Y
- Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
KOUSAHI, JHALEH
Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
- Provider English Spoken: Y
- Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
KOUSARI, JHALEH
Provider ID: 206426
Provider Gender: Female
License Number: NP20893
NPI: 1811262405
- Provider English Spoken: Y
- Provider Language(s): Farsi, Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
- Board Certified Specialty: No
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA
Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA
Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA
Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
MACIAS, ALISSA
Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
- Provider English Spoken: Y
- Cultural Competency: N
- Board Certified Specialty: No
- Phone: (760) 736-6767
- After Hours Phone: (760) 736-6767
- Website: www.ihpsocal.org
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Provider ID: 206426
Provider Gender: Female
License Number: NP21368
NPI: 1952658445
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE
BELANGER, TANYA
Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED NURSE MIDWIFE
BELANGER, TANYA
Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM
CERTIFIED REGISTERED NURSE MIDWIFE
BELANGER, TANYA
Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
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Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
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BELANGER, TANYA
Provider ID: 206426
Provider Gender: Female
License Number: NM235844
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Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
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American Sign Language (ASL): N
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CERTIFIED REGISTERED NURSE MIDWIFE
BELANGER, TANYA
Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
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Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
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American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
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SA 8:00AM-5:00PM

CERTIFIED REGISTERED NURSE MIDWIFE
BELANGER, TANYA
Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
150 VALPREDA RD
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Phone: (760) 736-6767
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Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

CERTIFIED REGISTERED NURSE MIDWIFE
BELANGER, TANYA
Provider ID: 206426
Provider Gender: Female
License Number: NM235844
NPI: 1407287469
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

NURSE MIDWIFE
KELLY, KATHERINE
Provider ID: 206426
Provider Gender: Female
License Number: NM235997
NPI: 1801134275
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
CERTIFIED REGISTERED NURSE MIDWIFE
KELLY, KATHERINE
Provider ID: 206426
Provider Gender: Female
License Number: NM235997
NPI: 1801134275
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1485
CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426
Provider Gender: Female
License Number: NM235997
NPI: 1801134275
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
150 VALPREDRA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED REGISTERED NURSE MIDWIFE

KELLY, KATHERINE

Provider ID: 206426
Provider Gender: Female
License Number: NM235997
NPI: 1801134275
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
150 VALPREDRA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

MATIAS, JULIE

Provider ID: 206426
Provider Gender: Female
License Number: 20A15159
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

NPI: 1083094510

Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
MATIAS, JULIE
Provider ID: 206426
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510

Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
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Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
MATIAS, JULIE
Provider ID: 206426
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510

Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
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Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
MATIAS, JULIE
Provider ID: 206426
Provider Gender: Female
License Number: 20A15159
NPI: 1083094510

Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
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MATIAS, JULIE
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NPI: 1083094510

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Cultural Competency: N
Board Certified Specialty: No
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Medi-Cal Open Panel: Yes
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Board Certified Specialty: No
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SAN MARCOS, CA 92069
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After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
NATH, DEVARSHI
Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FAMILY PRACTICE
NATH, DEVARSHI
Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
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Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
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Hours: M-F 8:00AM-5:00PM
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FAMILY PRACTICE
NATH, DEVARSHI
Provider ID: 206426
Provider Gender: Male
License Number: C54157
NPI: 1275630618
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Board Certified Specialty: No
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FAMILY PRACTICE
NATH, DEVARSHI
Provider ID: 206426
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Provider Language(s) Spoken: Bengali
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Board Certified Specialty: No
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After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM
D2. 初級保健名錄

- Provider Language(s)
  - Spoken: Bengali
  - Cultural Competency: N

- Board Certified Specialty: No

- 150 VALPREDA RD
  - SAN MARCOS, CA 92069
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

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

FAMILY PRACTICE
NATH, DEVARSHI

- Provider ID: 614511
- Provider Gender: Male
- License Number: C54157
- NPI: 1275630618
- Provider English Spoken: Y
- Provider Language(s)
  - Spoken: Bengali
  - Cultural Competency: N

- Board Certified Specialty: No

- 1595 GRAND AVE STE 106
  - SAN MARCOS, CA 92078
  - Phone: (760) 736-6767
  - Fax: (760) 736-6744
  - After Hours Phone: (760) 736-6767
  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
NATH, DEVARSHI

- Provider ID: 206426
- Provider Gender: Male
- License Number: C54157
- NPI: 1275630618
- Provider English Spoken: Y
- Provider Language(s)
  - Spoken: Bengali
  - Cultural Competency: N

- Board Certified Specialty: No

- 150 VALPREDA RD
  - SAN MARCOS, CA 92069
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
NATH, DEVARSHI

- Provider ID: 614511
- Provider Gender: Male
- License Number: C54157
- NPI: 1275630618
- Provider English Spoken: Y
- Provider Language(s)
  - Spoken: Bengali
  - Cultural Competency: N

- Board Certified Specialty: No

- 1595 GRAND AVE STE 106
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  - Phone: (760) 736-6767
  - Fax: (760) 736-6744
  - After Hours Phone: (760) 736-6767
  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
NATH, DEVARSHI

- Provider ID: 614511
- Provider Gender: Male
- License Number: C54157
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER

FAMILY PRACTICE  
NATH, DEVARSHI  
Provider ID: 614511  
Provider Gender: Male  
License Number: C54157  
NPI: 1275630618  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Bengali  
Cultural Competency: N  
Board Certified Specialty: No  
1595 GRAND AVE STE 106  
SAN MARCOS, CA 92078  
Phone: (760) 736-6767  
Fax: (760) 736-6744  
After Hours Phone: (760) 736-6767  
Website: www.ihpsocal.org 
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE  
SAFI, ROOZCHEHR  
Provider ID: 206426  
Provider Gender: Female  
License Number: A116562  
NPI: 1659563641  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi  
Cultural Competency: N  
Board Certified Specialty: No  
150 VALPREDA RD  
SAN MARCOS, CA 92069  
Phone: (760) 736-6767  
After Hours Phone: (760) 736-6767  
Website: www.ihpsocal.org 
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE  
SAFI, ROOZCHEHR  
Provider ID: 206426  
Provider Gender: Female  
License Number: A116562  
NPI: 1659563641  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi  
Cultural Competency: N  
Board Certified Specialty: No  
150 VALPREDA RD  
SAN MARCOS, CA 92069  
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After Hours Phone: (760) 736-6767  
Website: www.ihpsocal.org 
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SAFI, ROOZCHEHR
Provider ID: 206426
Provider Gender: Female
License Number: A116562
NPI: 1659563641
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
WILLIE, KADEN
Provider ID: 206426
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese
Cultural Competency: N
Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
WILLIE, KADEN
Provider ID: 206426
Provider Gender: Male
License Number: 20A17306
NPI: 1790133767
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese
Cultural Competency: N
Board Certified Specialty: No

150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1491
D2. 初級保健名錄

- **After Hours Phone**: (760) 736-6767
- **Website**: www.ihpsocal.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**FAMILY PRACTICE**

**WILLIE, KADEN**

Provider ID: 206426  
Provider Gender: Male  
License Number: 20A17306  
NPI: 1790133767

- **Provider English Spoken**: Y
- **Provider Language(s)**: Portuguese
- **Cultural Competency**: N
- **Board Certified Specialty**: No

- **150 VALPREDA RD**  
  SAN MARCOS, CA 92069  
  **Phone**: (760) 736-6767  
  **After Hours Phone**: (760) 736-6767
- **Website**: www.ihpsocal.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**FAMILY PRACTICE**

**WILLIE, KADEN**

Provider ID: 206426  
Provider Gender: Male  
License Number: 20A17306  
NPI: 1790133767

- **Provider English Spoken**: Y
- **Provider Language(s)**: Portuguese
- **Cultural Competency**: N
- **Board Certified Specialty**: No

- **150 VALPREDA RD**  
  SAN MARCOS, CA 92069  
  **Phone**: (760) 736-6767  
  **After Hours Phone**: (760) 736-6767
- **Website**: www.ihpsocal.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0-150
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

**FQHC TRUECARE**

Provider ID: 614511  
NPI: 1598484255

- **Provider English Spoken**: Y
- **Cultural Competency**: N

- **1595 GRAND AVE STE 106**  
  SAN MARCOS, CA 92078  
  **Phone**: (760) 736-6767  
  **Fax**: (760) 736-6744
- **After Hours Phone**: (760) 736-6767
- **Website**: www.ihpsocal.org
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0-999
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

FQHC
TRUECARE,
Provider ID: 614511
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
TRUECARE,
Provider ID: 206426
NPI: 1598484255
Provider English Spoken: Y
Cultural Competency: N
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
TRUECARE,
Provider ID: 206426
NPI: 1811617939
Provider English Spoken: Y
Cultural Competency: N
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
TRUECARE,
Provider ID: 206426
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D2. 初級保健名錄

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC
TRUECARE,
Provider ID: 206426
NPI: 1245246917
Provider English Spoken: Y
Cultural Competency: N
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: www.ihapsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

FQHC
TRUECARE,
Provider ID: 614511
NPI: 1811617939
Provider English Spoken: Y
Cultural Competency: N
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
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Fax: (760) 736-6744
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Website: www.ihapsocal.org
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Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
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FQHC
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Provider ID: 614511
NPI: 1598484255
Provider English Spoken: Y
Cultural Competency: N
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Fax: (760) 736-6744
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Website: www.ihapsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GENERAL PRACTICE
WITCZAK, IZABELA
Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
Provider English Spoken: Y
Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
D2. 初級保健名錄

ENCINITAS
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
WITCZAK, IZABELA
Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
Provider English Spoken: Y
Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
WITCZAK, IZABELA
Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
Provider English Spoken: Y
Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
WITCZAK, IZABELA
Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
Provider English Spoken: Y
Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
WITCZAK, IZABELA
Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
Provider English Spoken: Y
Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
WITCZAK, IZABELA
Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
Provider English Spoken: Y
Provider Language(s) Spoken: Polish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Provider ID: 206426
Provider Gender: Female
License Number: A71311
NPI: 1184735201
- Provider English Spoken: Y
- Provider Language(s): Polish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS
  - Board Certified Specialty: No
  - 150 VALPREDRA RD
  - SAN MARCOS, CA 92069
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 206426
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
  - 150 VALPREDRA RD
  - SAN MARCOS, CA 92069
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 206426
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
  - 150 VALPREDRA RD
  - SAN MARCOS, CA 92069
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 206426
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
  - 150 VALPREDRA RD
  - SAN MARCOS, CA 92069
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 206426
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
  - 150 VALPREDRA RD
  - SAN MARCOS, CA 92069
  - Phone: (760) 736-6767
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  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 206426
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
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  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 206426
Provider Gender: Male
License Number: G74757
NPI: 1467485078
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
  - 150 VALPREDRA RD
  - SAN MARCOS, CA 92069
  - Phone: (760) 736-6767
  - After Hours Phone: (760) 736-6767
  - Website: www.ihpsocal.org
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
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<th>PROVIDER</th>
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<td>Provider ID: 206426</td>
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<td><strong>MOSTOFIAN, EIMANEH</strong></td>
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<tr>
<td>Provider ID: 206426</td>
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<td>Provider Language(s) Spoken: Farsi, Spanish</td>
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<td>Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER</td>
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<tr>
<td>Board Certified Specialty: No</td>
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<tr>
<td>150 VALPREDRA RD</td>
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D2. 初級保健名錄

N

Provider ID: 206426
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
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Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
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American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM SA 8:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
MOSTOFIAN, EIMANEH

Provider ID: 206426
Provider Gender: Female
License Number: A97181
NPI: 1154477628
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
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OBSTETRICS / GYNECOLOGY
POUNTNEY, MARLENE

Provider ID: 206426
Provider Gender: Female
License Number: A93248
NPI: 1174703680
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
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OBSTETRICS / GYNECOLOGY
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Provider Gender: Female
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PEDIATRICS
MALHOTRA, ARATI
Provider ID: 206426
Provider Gender: Female
License Number: A63903
NPI: 1215135306
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
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POSDADAS, EMERITO
Provider ID: 206426
Provider Gender: Male
License Number: A48980
NPI: 1720093198
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MONAHAN, CAROLYN
Provider ID: 50425
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Hospital Affiliation: PALOMAR MEDICAL CENTER
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1582 W SAN MARCOS BLVD STE 203
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<td>150 VALPREDA RD SAN MARCOS, CA 92069</td>
<td>(760) 736-6767</td>
<td>(760) 566-1501</td>
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D2. 初級保健名錄
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-6:00PM
SA 8:00AM-5:00PM

PEDIATRICS
SEBIANE, MARIA
Provider ID: 206426
Provider Gender: Female
License Number: G71182
NPI: 1740295229
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RODY
CHILDREN'S HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Board Certified Specialty: No
150 VALPREDRA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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

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Provider Gender: Female
License Number: G71182
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Cultural Competency: N
Hospital Affiliation: RODY
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Board Certified Specialty: No
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SAN MARCOS, CA 92069
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After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
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D2. 初級保健名錄

MEDICAL CENTER
Board Certified Specialty: No
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
BERNARDO, RACHELLE
Provider ID: 614511
Provider Gender: Female
License Number: PA17718
NPI: 1821237678
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
1595 GRAND AVE STE 106
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Min/Max Age: 0\999
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PHYSICIANS ASSISTANT
BLAKESPEAR, JEREMY
Provider ID: 206426
Provider Gender: Male
License Number: PA19825
NPI: 1750474177
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
PHYSICIANS ASSISTANT
BLAKESPEAR, JEREMY
Provider ID: 206426
Provider Gender: Male
License Number: PA19825
NPI: 1750474177
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDAR RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
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American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
BLAKESPEAR, JEREMY
Provider ID: 206426
Provider Gender: Male
License Number: PA19825
NPI: 1750474177
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
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After Hours Phone: (760) 736-6767
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American Sign Language (ASL): N
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PHYSICIANS ASSISTANT
BLAKESPEAR, JEREMY
Provider ID: 206426
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BLAKESPEAR, JEREMY
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License Number: PA19825
NPI: 1750474177
Provider English Spoken: Y
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Board Certified Specialty: No
150 VALPREDAR RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
CHISWICK, GARY
Provider ID: 206426
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

GROSSMONT HOSPITAL
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
CHISWICK, GARY
Provider ID: 206426
Provider Gender: Male
License Number: PA22667
NPI: 1174964001
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
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 PHYSICIANS ASSISTANT
KOSEL, MATTHEW
Provider ID: 206426
Provider Gender: Male
License Number: PA17101
NPI: 1316947302
Provider English Spoken: Y
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Board Certified Specialty: No
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Accessibility: CONTACT PROVIDER

 PHYSICIANS ASSISTANT
KOSEL, MATTHEW
Provider ID: 206426
Provider Gender: Male

## D2. 初級保健名錄

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| **PHYSICIANS ASSISTANT** | **RUSSO, KRISTA**  
Provider ID: 206426  
Provider Gender: Female  
License Number: PA53036  
NPI: 1922471192  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
150 VALPREDA RD  
SAN MARCOS, CA 92069  
Phone: (760) 736-6767  
After Hours Phone: (760) 736-6767  
Website: www.ihsfbsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
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Hours: M-F 8:00AM-5:00PM  
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RUSSO, KRISTA
Provider ID: 206426
Provider Gender: Female
License Number: PA53036
NPI: 1922471192
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
SPENCE, JAMIE
Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
SPENCE, JAMIE
Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
SPENCE, JAMIE
Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PHYSICIANS ASSISTANT
SPENCE, JAMIE
Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT
TAHRIRI, BAHAREH
Provider ID: 206426
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org

PHYSICIANS ASSISTANT
SPENCE, JAMIE
Provider ID: 206426
Provider Gender: Female
License Number: PA21723
NPI: 1518133032
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
After Hours Phone: (760) 736-6767
Website: www.ihpsocal.org

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT
TAHRIRI, BAHAREH
Provider ID: 206426
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT
TAHRIRI, BAHAREH
Provider ID: 206426
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

PHYSICIANS ASSISTANT
TAHRIRI, BAHAREH
Provider ID: 206426
Provider Gender: Female
License Number: PA51867
NPI: 1295147387
 Provider English Spoken: Y
 Provider Language(s) Spoken: Farsi
 Cultural Competency: N
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
 After Hours Phone: (760) 736-6767
 Website: www.ihpsocal.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM

SAN YSIDRO

ALLERGY IMMUNOLOGY
REDDY, SUMANA
Provider ID: 206292
Provider Gender: Female
License Number: C52581
NPI: 1053300251
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Cambodian, Hindi, Spanish, Telugu
 Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: www.syhealth.org
 /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

ALLERGY IMMUNOLOGY
REDDY, SUMANA
Provider ID: 206292
Provider Gender: Female
License Number: C52581
NPI: 1053300251
D2. 初級保健名錄

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Cambodian, Hindi, Spanish, Telugu
- **Cultural Competency:** N
- **Hospital Affiliation:** GROSSMONT HOSPITAL
- **Board Certified Specialty:** No
- **Address:** 4004 BEYER BLVD, SAN YSIDRO, CA 92173
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100
- **Website:** www.syhealth.org /clinics/san-ysidro-health-center
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\-150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**CELIZ, ADRIANA**

- **Provider ID:** 227469
- **Provider Gender:** Female
- **License Number:** NP95004315
- **NPI:** 1972956514
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
- **Board Certified Specialty:** No
- **Address:** 3364 BEYER BLVD, SAN YSIDRO, CA 92173
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100
- **Website:** https://www.syhealth.org/locations
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\-150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

**CERTIFIED NURSE PRACTITIONER**

**CELIZ, ADRIANA**

- **Provider ID:** 206292
- **Provider Gender:** Female
- **License Number:** A145008
- **NPI:** 1164659033
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
- **Board Certified Specialty:** No
- **Address:** 4004 BEYER BLVD, SAN YSIDRO, CA 92173
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100
- **Website:** www.syhealth.org /clinics/san-ysidro-health-center
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\-150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER

**CARDIOVASCULAR DISEASE**

**PONCE, SONIA**

- **Provider ID:** 206292
- **Provider Gender:** Female
- **License Number:** A145008
- **NPI:** 1164659033
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
- **Board Certified Specialty:** No
- **Address:** 4004 BEYER BLVD, SAN YSIDRO, CA 92173
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100
- **Website:** www.syhealth.org /clinics/san-ysidro-health-center
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\-150
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
CERTIFIED NURSE PRACTITIONER
CHAUSSE CASTRO, EKATERINA
Provider ID: 227469
Provider Gender: Female
License Number: NP95018617
NPI: 1154040418
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
GARCIA, TEDAYSHIA
Provider ID: 206292
Provider Gender: Female
License Number: NP95003355
NPI: 1659730778
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
GUADARRAMA, IGNACIO
Provider ID: 227469
Provider Gender: Male
License Number: NP95003671
NPI: 1821331174

D2. 初級保健名錄

- **Provider English Spoken:** Y
- **Provider Language(s):** Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No

**GUADARRAMA, IGNACIO**

Provider ID: 227469  
Provider Gender: Male  
License Number: NP95003671  
NPI: 182133174

- **Provider English Spoken:** Y
- **Provider Language(s):** Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No

**ACCESSIBILITY:** CONTACT PROVIDER

**HACINAS, REYNALDO**

Provider ID: 206292  
Provider Gender: Male  
License Number: NP95003024  
NPI: 1215304860

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

**4004 BEYER BLVD**  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100

- **Website:** https://www.syhealth.org/locations
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N

- **ACCESSIBILITY:** CONTACT PROVIDER

**HACINAS, REYNALDO**

Provider ID: 206292  
Provider Gender: Male  
License Number: NP95003024  
NPI: 1215304860

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

**4004 BEYER BLVD**  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100

- **Website:** www.syhealth.org/locations
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N

- **ACCESSIBILITY:** CONTACT PROVIDER

**IBARRA, MARTHA**

Provider ID: 206292  
Provider Gender: Female  
License Number: NP12112  
NPI: 1114957289

- **Provider English Spoken:** Y
- **Provider Language(s):** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
- **Board Certified Specialty:** No

**4004 BEYER BLVD**  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100

- **Website:** www.syhealth.org/locations
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150
- **American Sign Language (ASL):** N

- **ACCESSIBILITY:** CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM

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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

SA 8:30AM-2:00PM

CERTIFIED NURSE
PRACTITIONER
IBARRA, MARTHA
Provider ID: 227469
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
KANTAS, PARIS
Provider ID: 206292
Provider Gender: Male
License Number: NP18661
NPI: 1114329612
☑ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
IBARRA, MARTHA
Provider ID: 227469
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
IBARRA, MARTHA
Provider ID: 227469
Provider Gender: Female
License Number: NP12112
NPI: 1114957289
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER

CERTIFIED NURSE
PRACTITIONER
D2. 初級保健名錄

PRACTITIONER
KANTAS, PARIS
Provider ID: 206292
Provider Gender: Male
License Number: NP18661
NPI: 1114329612
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
ORDINANZA, MYLENE
Provider ID: 227469
Provider Gender: Female
License Number: NP95019995
NPI: 1265019061
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
PITTMAN, LILIANA
Provider ID: 227469
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PRACTITIONER
ORDINANZA, MYLENE
Provider ID: 227469
Provider Gender: Female
License Number: NP95019995
NPI: 1265019061
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
PITTMAN, LILIANA
Provider ID: 227469
Provider Gender: Female
License Number: NP95017732
NPI: 1326599002
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
SANCHEZ, MYRNA
Provider ID: 227469
Provider Gender: Female
License Number: NP95003721
NPI: 1548614506
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
VAZQUEZ-ERLBECK, MARTHA
Provider ID: 227469
Provider Gender: Female
License Number: NP95001960
NPI: 1669865960
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHIROPRACTOR
OCHOA, RAUL
Provider ID: 206292
Provider Gender: Male
License Number: DC33693
NPI: 1518401827
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Provider ID: 206292
Provider Gender: Male
License Number: DC33693
NPI: 1518401827
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 4004 BEYER BLVD
  SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org /clinics/san-ysidro-health-center
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

ENDOCRINOLOGY METABOLISM DIABETES
CRUZ, MICHAEL
Provider ID: 206292
Provider Gender: Male
License Number: A138772
NPI: 1265851133
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP MEMORIAL HOSPITAL
- Board Certified Specialty: No
- 4004 BEYER BLVD
  SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org /clinics/san-ysidro-health-center
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ALGHAMDI, ASMA
Provider ID: 227469
Provider Gender: Female
License Number: A167529
NPI: 1316310840
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 3364 BEYER BLVD
  SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org/locations
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
Provider ID: 206292
Provider Gender: Male
License Number: A157505
NPI: 1588197826
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
Provider ID: 227411
Provider Gender: Male
License Number: A157505
NPI: 1588197826
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
Provider ID: 206292
Provider Gender: Male
License Number: A157505
NPI: 1588197826
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL
Provider ID: 227411
Provider Gender: Male
License Number: A157505
NPI: 1588197826
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE
ARRIETA, NOEMI
Provider ID: 206292
Provider Gender: Female
License Number: 20A11153
NPI: 1912223496

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE
BAUM, PETER
Provider ID: 227411
Provider Gender: Male
License Number: 20A14949
NPI: 1174919971

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE
BORSAN, COSMIN
Provider ID: 206292
Provider Gender: Male
License Number: 20A17643
NPI: 1679060255

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
D2. 初級保健名錄

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Romanian
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Address:** 4004 Beyer Blvd, San Ysidro, CA 92173
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100
- **Website:** www.syhealth.org/clinics/san-ysidro-health-center
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150

**American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

**FAMILY PRACTICE**

**CAMPOS, MELISSA**

- **Provider ID:** 227411
- **Provider Gender:** Female
- **License Number:** A138474
- **NPI:** 1427475318
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
- **Board Certified Specialty:** No
- **Address:** 4050 Beyer Blvd, San Ysidro, CA 92173
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100
- **Website:** syhealth.org/clinics/maternal-child-health-center
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150

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

**FAMILY PRACTICE**

**CAMPOS, MELISSA**

- **Provider ID:** 227411
- **Provider Gender:** Female
- **License Number:** A138474
- **NPI:** 1427475318
- **Provider English Spoken:** Y
- **Spoken:** Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Address:** 4004 Beyer Blvd, San Ysidro, CA 92173
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100
- **Website:** www.syhealth.org/clinics/maternal-child-health-center
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150

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

- **Provider English Spoken:** Y
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
- **Board Certified Specialty:** No

**FAMILY PRACTICE**

**CARRIEDO CENICEROS, MARIA**

- **Provider ID:** 206292
- **Provider Gender:** Female
- **License Number:** A78373
- **NPI:** 1295746618
- **Provider English Spoken:** Y
- **Spoken:** Spanish
- **Cultural Competency:** N
- **Board Certified Specialty:** No
- **Address:** 4004 Beyer Blvd, San Ysidro, CA 92173
- **Fax:** (619) 205-6341
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100
- **Website:** www.syhealth.org/clinics/maternal-child-health-center
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\150

**American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CARRIEO CENICEROS, MARIA
Provider ID: 206292
Provider Gender: Female
License Number: A78373
NPI: 1295746618
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE
CASTILLO, STEPHANIE
Provider ID: 206292
Provider Gender: Female
License Number: A159673
NPI: 1902330723
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CEVALLOS, JAMES
Provider ID: 206292
Provider Gender: Male
License Number: A55469
NPI: 1720181829
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
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After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CEVALLOS, JAMES
Provider ID: 206292
Provider Gender: Male
License Number: A55469
NPI: 1720181829
Provider English Spoken: Y
Provider Language(s)
D2. 初級保健名錄

初級保健名錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
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Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CORONADO, MYRNA
Provider ID: 206292
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CORONADO, MYRNA
Provider ID: 227411
Provider Gender: Female
License Number: A112627
NPI: 1710147566
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

FAMILY PRACTICE
DALUGDUGAN, ESTHER
Provider ID: 206292
Provider Gender: Female
License Number: A112511
NPI: 1962662718
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ESTRADA, JOHANNA
Provider ID: 206292
Provider Gender: Female
License Number: A127188
NPI: 1255698155
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM
D2. 初級保健名錄

FAMILY PRACTICE
HEINRICI, ALEKA
Provider ID: 206292
Provider Gender: Female
License Number: A125329
NPI: 1780979120
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MEMORIAL HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE
HENDRIX, JEFFERSON
Provider ID: 227469
Provider Gender: Male
License Number: A32571
NPI: 1235142738
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
HERNANDEZ, RALPH
Provider ID: 227469
Provider Gender: Male
License Number: C42207
NPI: 1285782151
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
HERNANDEZ, RALPH
Provider ID: 227469
Provider Gender: Male
License Number: C42207
NPI: 1285782151
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
HERNANDEZ, RALPH
Provider ID: 206292
Provider Gender: Male
License Number: C42207
NPI: 1285782151
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
KAUFHOLD, ANNE
Provider ID: 206292
Provider Gender: Female
License Number: A88893
NPI: 1164508073
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
KAUFHOLD, ANNE
Provider ID: 206292
Provider Gender: Female
License Number: A88893
NPI: 1164508073
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
 PHYSICIAN
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

FAMILY PRACTICE
LARA, LESLEY
Provider ID: 206292
Provider Gender: Female
License Number: A173435
NPI: 1184112682
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
 PHYSICIAN
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

FAMILY PRACTICE
LEE, JOSEPH
Provider ID: 206292
Provider Gender: Male
License Number: A164201
NPI: 1417480948
 Provider English Spoken: Y
 Cultural Competency: N
Board Certified Specialty: No
 PHYSICIAN
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE
LEE, JOSEPH
Provider ID: 206292
Provider Gender: Male
License Number: A164201
NPI: 1417480948
 Provider English Spoken: Y
 Cultural Competency: N
Board Certified Specialty: No
 PHYSICIAN
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
 M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
### D2. 初級保健名錄

<table>
<thead>
<tr>
<th>FAMILY PRACTICE</th>
<th>LEPEZ, DAVID</th>
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<tbody>
<tr>
<td>Provider ID:</td>
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<tr>
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<td>Hours:</td>
<td>M-F 8:00AM-5:00PM</td>
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<tr>
<th>FAMILY PRACTICE</th>
<th>LEUTE, ERIC</th>
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<tbody>
<tr>
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<td>Provider Gender:</td>
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<tr>
<td>Accessibility:</td>
<td>CONTACT PROVIDER</td>
</tr>
</tbody>
</table>

Your PCP's doctor’s clinic may have its own mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require prior authorization from the mental health service provider and then be covered. To access the mental health service provider list online, please visit blueshieldca.com/fad.
D2. 初級保健名錄

License Number: A80832
NPI: 1720171507
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
MOYA, MARY
Provider ID: 206292
Provider Gender: Female
License Number: A80185
NPI: 1093844417
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
LEUTE, ERIC
Provider ID: 206292
Provider Gender: Male
License Number: A80832
NPI: 1720171507
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
NAVARRO, VANESSA
Provider ID: 227469
D2. 初級保健名錄

**FAMILY PRACTICE**

**NGUYEN, CARIE**

Provider ID: 206292  
Provider Gender: Female  
License Number: A106103  
NPI: 1174781132  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL  
Board Certified Specialty: No  
3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: https://www.syhealth.org/locations  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0|150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**

**NIKZAD, JASON**

Provider ID: 206292  
Provider Gender: Male  
License Number: 20A12653  
NPI: 1508121674  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi, Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

---

**NAVARRO, VANESSA**

Provider ID: 227469  
Provider Gender: Female  
License Number: A113624  
NPI: 1952563421  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Filipino, Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

---

**FAMILY PRACTICE**

**NGUYEN, CARIE**

Provider ID: 206292  
Provider Gender: Female  
License Number: A106103  
NPI: 1174781132  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org /clinics/san-ysidro-health-center  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0|150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**FAMILY PRACTICE**

**NIKZAD, JASON**

Provider ID: 206292  
Provider Gender: Male  
License Number: 20A12653  
NPI: 1508121674  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Farsi, Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
D2. 初級保健名錄

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE
ORTEGA, LUÍS

Provider ID: 206292
Provider Gender: Male
License Number: A180886
NPI: 1558924936

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

FAMILY PRACTICE
ORTIZ, KENNETH

Provider ID: 206292
Provider Gender: Male
License Number: A156607
NPI: 1356761571

Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173

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

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM
D2. 初級保健名錄

662-4100
Website: www.syhealth.org/clinics/san-ysidro-health -center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ORTIZ, KENNETH
Provider ID: 206292
Provider Gender: Male
License Number: A156607
NPI: 1356761571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health -center

FAMILY PRACTICE
ORTIZ ILIZALITURRI, ANA
Provider ID: 206292
Provider Gender: Female
License Number: A178949
NPI: 1316407026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health -center

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

Hours: M-F 8:30AM-5:00PM

FAMILY PRACTICE
ORTIZ ILIZALITURRI, ANA
Provider ID: 206292
Provider Gender: Female
License Number: A178949
NPI: 1316407026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ORTIZ ILIZALITURRI, ANA
Provider ID: 227411
Provider Gender: Female
License Number: A178949
NPI: 1316407026
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

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

FAMILY PRACTICE
ORTIZ ILIZALITURRI, ANA
Provider ID: 227411
Provider Gender: Female
License Number: A178949
NPI: 1316407026

Provider English Spoken: Y  
Provider Language(s): Spanish  
Spoken: Spanish  
Cultural Competency: N
Hospital Affiliation: SCIRPPS MEMORIAL HOSPITAL, SCIRPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM  
SA 8:30AM-2:00PM

FAMILY PRACTICE
RAJAIPOUR, NEGIN
Provider ID: 227469
Provider Gender: Female
License Number: A145480
NPI: 1508286709

Provider English Spoken: Y  
Provider Language(s): Farsi
Spoken: Farsi  
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org /locations
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Provider ID: 227469
Provider Gender: Female
License Number: A145480
NPI: 1508286709
- Provider English Spoken: Y
- Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
RITTER, STEVEN
Provider ID: 206292
Provider Gender: Male
License Number: 20A7435
NPI: 1356556021
- Provider English Spoken: Y
- Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ROJAS, STEVEN
Provider ID: 206292
Provider Gender: Male
License Number: A132982
NPI: 1801230297
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供
者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪 bluesshieldca.com/fad。
### Provider Information

<table>
<thead>
<tr>
<th>Provider Name</th>
<th>ID Number</th>
<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>English Spoken</th>
<th>Language(s) Spoken</th>
<th>Cultural Competency</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ROSENBAUM, HERBERT</strong></td>
<td>206292</td>
<td>Male</td>
<td>A169694</td>
<td>1922532712</td>
<td>Y</td>
<td>Spanish</td>
<td>N</td>
<td>No</td>
<td>4004 BEYER BLVD, SAN YSIDRO, CA 92173</td>
<td>(619) 662-4100</td>
<td>(619) 662-4100</td>
<td><a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a></td>
</tr>
<tr>
<td><strong>SALEM, RAMSEY</strong></td>
<td>206292</td>
<td>Male</td>
<td>A158364</td>
<td>1245401298</td>
<td>Y</td>
<td>N</td>
<td>N</td>
<td>No</td>
<td>4004 BEYER BLVD, SAN YSIDRO, CA 92173</td>
<td>(619) 662-4100</td>
<td>(619) 662-4100</td>
<td><a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a></td>
</tr>
<tr>
<td><strong>SHAHTAJI, ALAN</strong></td>
<td>206292</td>
<td>Male</td>
<td>20A11087</td>
<td>1972751089</td>
<td>Y</td>
<td>N</td>
<td>N</td>
<td>No</td>
<td>4004 BEYER BLVD, SAN YSIDRO, CA 92173</td>
<td>(619) 662-4100</td>
<td>(619) 662-4100</td>
<td><a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a></td>
</tr>
</tbody>
</table>

**Medi-Cal Open Panel:** Yes
**Min/Max Age:** 0-150

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

**Accessibility:** CONTACT PROVIDER

---

**D2. 初級保健名錄**

- PROVIDER
  - Hours: M-F 8:00AM-5:30PM
  - SA 8:30AM-2:00PM

- **FAMILY PRACTICE ROSENBAUM, HERBERT**
  - Provider ID: 206292
  - Provider Gender: Male
  - License Number: A169694
  - NPI: 1922532712
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Provider ID: 206292
  - Provider Gender: Male
  - License Number: A169694
  - NPI: 1922532712

- **FAMILY PRACTICE SALEM, RAMSEY**
  - Provider ID: 206292
  - Provider Gender: Male
  - License Number: A158364
  - NPI: 1245401298
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N

- **FAMILY PRACTICE SHAHTAJI, ALAN**
  - Provider ID: 206292
  - Provider Gender: Male
  - License Number: 20A11087
  - NPI: 1972751089
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N

**Accessibility:** CONTACT PROVIDER
D2. 初級保健名錄

/clinics/san-ysidro-health
- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SHAHTAJI, ALAN
Provider ID: 206292
Provider Gender: Male
License Number: 20A11087
NPI: 1972751089
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD
 MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
SNYDER, CHRISTOPHER
Provider ID: 206292
Provider Gender: Male
License Number: 20A7502
NPI: 1922041235
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: PIH
KENNEDY MEMORIAL HOSP,
CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS,
EISENHOWER MEDICAL CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
STALEY, MICHAELA
Provider ID: 206292
Provider Gender: Female
License Number: A157772
NPI: 1912438250
 Provider English Spoken: Y
 Cultural Competency: N
 Board Certified Specialty: No
 4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL

SWEET, PATRICK
Provider ID: 206292
Provider Gender: Male
License Number: A101827
NPI: 1457407702
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

TALAVERA, GREGORY
Provider ID: 206292
Provider Gender: Male
License Number: A40061
NPI: 1740337161
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: HOAG HOSPITAL IRVINE, SCRIPPS MERCY HOSPITAL CHULA VISTA, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, DESERT REGIONAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PIONEERS MEMORIAL HOSPITAL, PIONEERS MEMORIAL HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
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Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM
D2. 初級保健名錄

Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM

FAMILY PRACTICE
TALAVERA, GREGORY
Provider ID: 206292
Provider Gender: Male
License Number: A40061
NPI: 1740337161
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
TREJO, RAUL
Provider ID: 206292
Provider Gender: Male
License Number: A77936
NPI: 1174353094
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
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 After Hours Phone: (619) 662-4100
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
UTZ, JACK
Provider ID: 206292
Provider Gender: Male
License Number: A183145
NPI: 1194353094
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
UTZ, JACK
Provider ID: 206292
Provider Gender: Male
License Number: A183145
NPI: 1194353094
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 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
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 Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
### D2. 初級保健名錄

<table>
<thead>
<tr>
<th>Provider</th>
<th>Language(s)</th>
<th>Specialty</th>
<th>Hours</th>
<th>Notes</th>
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</thead>
<tbody>
<tr>
<td><strong>FAMILY PRACTICE</strong></td>
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</tr>
<tr>
<td><strong>VAN HOLLEBEKE, RACHEL</strong></td>
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<td>Provider Gender: Female</td>
<td>License Number: A177337</td>
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<td>Provider Language(s)</td>
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</table>

**American Sign Language (ASL):**

- N

**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0 | 150

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

- **Hospital Affiliation:** SCRIPPS MEMORIAL HOSPITAL
- **Board Certified Specialty:** No
- **4004 Beyer Blvd**
- **San Ysidro, CA 92173**
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100

**Velasquez, Sharon**

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<th>Provider</th>
<th>Language(s)</th>
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<td>Provider Language(s)</td>
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**American Sign Language (ASL):**

- N

**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0 | 150

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

- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA
- **Board Certified Specialty:** No
- **4004 Beyer Blvd**
- **San Ysidro, CA 92173**
- **Phone:** (619) 662-4100
- **After Hours Phone:** (619) 662-4100

**Velasquez, Sharon**

<table>
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<th>Language(s)</th>
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<td>Provider Gender: Female</td>
<td>License Number: A71304</td>
<td>NPI: 1972732594</td>
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<td>Provider Language(s)</td>
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<td>N</td>
<td>Accessibility: CONTACT PROVIDER</td>
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**American Sign Language (ASL):**

- N

**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0 | 150

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

- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA
- **Board Certified Specialty:** No
- **4004 Beyer Blvd**
- **San Ysidro, CA 92173**
- **Phone:** (619) 662-4100

1542
D2. 初級保健名錄

- **After Hours Phone**: (619) 662-4100
  - Website: www.syhealth.org/clinics/san-ysidro-health-center
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - NPI: 1558852947
  - Provider English Spoken: Y
  - Cultural Competency: N
    - 4050 BEYER BLVD
    - SAN YSIDRO, CA 92173
    - Phone: (619) 662-4100
    - Fax: (619) 205-1967
    - After Hours Phone: (619) 662-4100
    - Website: syhealth.org/clinics/maternal-child-health-center
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\150
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-F 8:00AM-5:30PM

  - **FQHC SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER, Provider ID: 206292
    - NPI: 1952364747
    - Provider English Spoken: Y
    - Cultural Competency: N
      - 4004 BEYER BLVD
      - SAN YSIDRO, CA 92173
      - Phone: (619) 662-4100
      - Fax: (619) 205-6305
      - After Hours Phone: (619) 662-4100
      - Website: www.syhealth.org/clinics/san-ysidro-health-center
      - Medi-Cal Open Panel: Yes
      - Min/Max Age: 0\150
      - American Sign Language (ASL): N
      - Accessibility: CONTACT PROVIDER
      - Hours: M-F 8:00AM-5:30PM
      - SA 8:30AM-2:00PM

  - **FQHC SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS, Provider ID: 227469
    - NPI: 1801438239
    - Provider English Spoken: Y
    - Cultural Competency: N
      - 3364 BEYER BLVD
      - SAN YSIDRO, CA 92173
      - Phone: (619) 662-4100
      - Fax: (619) 600-4870
      - After Hours Phone: (619) 662-4100
      - Website: https://www.syhe
D2. 初級保健名錄

alth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FQHC
SAN YSIDRO HLTH SAN DIEGO
PACE SENIOR HLTH SVS,
Provider ID: 227469
NPI: 1801438239
 Provider English Spoken: Y
Cultural Competency: N
 3364 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
Fax: (619) 600-4870
 After Hours Phone: (619) 662-4100
 Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE
REYNAGA, JOSUE
Provider ID: 206292
Provider Gender: Male
License Number: A66885
NPI: 1407940075
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE
TEJEDA, FRANCISCO
Provider ID: 206292
Provider Gender: Male
License Number: A66885
NPI: 1407940075
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE
TEJEDA, FRANCISCO
Provider ID: 206292
Provider Gender: Male
License Number: A66885
NPI: 1407940075
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

GENERAL PRACTICE
TEJEDA, FRANCISCO
Provider ID: 206292
Provider Gender: Male
License Number: A66885
NPI: 1407940075
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM
D2. 初級保健名錄

License Number: A66885
NPI: 1407940075
☑ Provider English Spoken: Y
☐ Cultural Competency: N
Board Certified Specialty: No

**INFECTIOUS DISEASE**

**PROMER, KATHERINE**
Provider ID: 206292
Provider Gender: Female
License Number: A131952
NPI: 1306280607
☑ Provider English Spoken: Y
☐ Provider Language(s) Spoken: Spanish

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER
Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER

**GYNECOLOGY**

**CALDERON, JORGE**
Provider ID: 206292
Provider Gender: Male
License Number: A40480
NPI: 1407800881

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

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, LOMPOC VALLEY MEDICAL CENTER
Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER

Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER

**INFECTIOUS DISEASE**

**PROMER, KATHERINE**
Provider ID: 206292
Provider Gender: Female
License Number: A131952
NPI: 1306280607
☑ Provider English Spoken: Y
D2. 初級保健名錄

- Provider Language(s)
  - Spoken: Spanish
  - Cultural Competency: N
- Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER
- Board Certified Specialty: No
- 4004 BEYER BLVD
- SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org /clinics/san-ysidro-health-center
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE ALDOUS, JEANNETTE
- Provider ID: 206292
- Provider Gender: Female
- License Number: A101017
- NPI: 1073650339
- Provider English Spoken: Y
- Provider Language(s)
  - Spoken: Spanish
  - Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Board Certified Specialty: No
- 4004 BEYER BLVD
- SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org /clinics/san-ysidro-health-center
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE CARPENTER, ROBERT
- Provider ID: 206292
- Provider Gender: Male
- License Number: 20A10964
- NPI: 1356343040
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
- Board Certified Specialty: No
- 4004 BEYER BLVD
- SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org /clinics/san-ysidro-health-center
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE CARPENTER, ROBERT
- Provider ID: 206292
- Provider Gender: Male
- License Number: 20A10964
- NPI: 1356343040
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
- Board Certified Specialty: No
- 4004 BEYER BLVD
- SAN YSIDRO, CA 92173

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D2. 初級保健名錄

Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
CHEN, TSUH YIN
Provider ID: 206292
Provider Gender: Female
License Number: C55563
NPI: 1093803520
Provider English Spoken: Y
Provider Language(s) Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
CHOW, MAN HUNG
Provider ID: 227469
Provider Gender: Female
License Number: G66745
NPI: 1225149115
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: Paradise Valley Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista, Scripps Memorial Hospital, Scripps Mercy Hospital
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
CHOW, MAN HUNG
Provider ID: 227469
Provider Gender: Female
License Number: G66745
NPI: 1225149115
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3364 BEYER BLVD
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Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
CHOW, MAN HUNG
Provider ID: 227469
Provider Gender: Female
License Number: G66745
NPI: 1225149115
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Provider Language(s) Spoken: Chinese, Mandarin
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Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

INTERNAL MEDICINE
DE LA ROSA, JOSE
Provider ID: 206292
Provider Gender: Male
License Number: A49267
NPI: 1689646572
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

INTERNAL MEDICINE
DILLON, BENEDICT
Provider ID: 227411
Provider Gender: Male
License Number: A111118
NPI: 1710142708
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

CHULA VISTA, CHULA VISTA COMM HOSP
Board Certified Specialty: No

INTERNAL MEDICINE
DE LA ROSA, JOSE
Provider ID: 206292
Provider Gender: Male
License Number: A49267
NPI: 1689646572
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

INTERNAL MEDICINE
DILLON, BENEDICT
Provider ID: 227411
Provider Gender: Male
License Number: A111118
NPI: 1710142708
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

INTERNAL MEDICINE
DE LA ROSA, JOSE
Provider ID: 206292
Provider Gender: Male
License Number: A49267
NPI: 1689646572
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

INTERNAL MEDICINE
DILLON, BENEDICT
Provider ID: 227411
Provider Gender: Male
License Number: A111118
NPI: 1710142708
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
D2. 初級保健名錄

enter
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
HURST, MICHAEL
Provider ID: 206292
Provider Gender: Male
License Number: 20A8081
NPI: 1205893104
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SUTTER TRACY COMMUNITY HOSP, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-8:00PM
SA 8:00AM-2:00PM

INTERNAL MEDICINE
KAUFER, DAVID
Provider ID: 206292
Provider Gender: Male
License Number: G80107
NPI: 1710082789
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM
D2. 初級保健名錄

INTERNAL MEDICINE
KAUFER, DAVID
Provider ID: 227469
Provider Gender: Male
License Number: G80107
NPI: 1710082789
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
LAMANTIA, MICHELE
Provider ID: 206292
Provider Gender: Female
License Number: G71855
NPI: 1124176102
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
MAY, LOUIS
Provider ID: 206292
Provider Gender: Male
License Number: A138568
NPI: 1720497514
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

INTERNAL MEDICINE
MAY, LOUIS
Provider ID: 206292
Provider Gender: Male
License Number: A138568
NPI: 1720497514
_provider English Spoken: Y
_provider Language(s) Spoken: Spanish
_Cultural Competency: N
_Hospital Affiliation: EISENHOWER MEDICAL CTR
Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): Yes
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
POAST, JENNIFER
Provider ID: 206292
Provider Gender: Female
License Number: 20A8245
NPI: 1164435681
_provider English Spoken: Y
_Cultural Competency: N
_Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): Yes
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
PARK, DANIEL
Provider ID: 206292
Provider Gender: Male
License Number: A99433
NPI: 1538371844
_provider English Spoken: Y
_Cultural Competency: N
_Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): Yes
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
POAST, JENNIFER
Provider ID: 206292
Provider Gender: Female
License Number: 20A8245
NPI: 1164435681
_provider English Spoken: Y
_Cultural Competency: N
_Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): Yes
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

/clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
RAMIREZ SANCHEZ, CLAUDIA
Provider ID: 206292
Provider Gender: Female
License Number: A160493
NPI: 1659720555
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
 Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
SALERNO, MARIANA
Provider ID: 206292
Provider Gender: Female
License Number: A131021
NPI: 1598921645
 Provider English Spoken: Y
 C Cultural Competency: N
Hospital Affiliation: Providence
St. Joseph Hospital Eureka
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
 Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
SCHNEIDER-MUNOZ, MARGARITA
Provider ID: 206292
Provider Gender: Female

D2. 初級保健名錄

License Number: G81461
NPI: 1821299520
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No

INTERNAL MEDICINE
SHEIKH MOHAMED, AMIRA
Provider ID: 227469
Provider Gender: Female
License Number: A153975
NPI: 1831583079
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Hindi, Italian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

INTERNAL MEDICINE
SHEIKH MOHAMED, AMIRA
Provider ID: 227469
Provider Gender: Female
License Number: A153975
NPI: 1831583079
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French, Hindi, Italian, Urdu
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No

INTERNAL MEDICINE
SY, RAMON
Provider ID: 227469
Provider Gender: Male
License Number: A51843
NPI: 1982617403
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS
D2. 初級保健名錄

MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
VELAZQUEZ CAMARENA, MARIA
Provider ID: 206292
Provider Gender: Female
License Number: A56153
NPI: 1518965714
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
WEN, AKI YEN CHANG
Provider ID: 227411
Provider Gender: Male
License Number: 20A12555
NPI: 1205126505
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
WEN, AKI YEN CHANG
Provider ID: 227411
Provider Gender: Male
License Number: 20A12555
NPI: 1205126505
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
Provider Language(s) Spoken: Farsi

Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNETIONAL CARDIOLOGY
MOUSSAVIAN, MEHRAN
Provider ID: 206292
Provider Gender: Male
License Number: 20A7241
NPI: 1689788234
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, TRICITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCIRPPS MEMORIAL HOSPITAL, Adventist Health and Rideout Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/medical-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BERGGREN, ERICA
Provider ID: 227411
Provider Gender: Female
License Number: C158543
NPI: 1912159674
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, TRICITY MEDICAL CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, SCIRPPS MEMORIAL HOSPITAL, ADVENTIST HEALTH AND RIDEOUT
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

1555
D2. 初級保健名錄

SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
BERGGREN, ERICA
Provider ID: 227411
Provider Gender: Female
License Number: C158543
NPI: 1912159674
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
CARR, MIANDA
Provider ID: 206292
Provider Gender: Female
License Number: A104660
NPI: 1083815823
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CARR, MIANDA
Provider ID: 227411
Provider Gender: Female
License Number: A104660
NPI: 1083815823
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST JOSEPHS MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CARR, MIANDA
Provider ID: 206292
Provider Gender: Female
License Number: A104660
NPI: 1083815823
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST JOSEPHS MEDICAL CENTER,
D2. 初級保健名錄

SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
한국
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CARR, MIANDA
Provider ID: 227411
Provider Gender: Female
License Number: A104660
NPI: 1083815823
Provider English Spoken: N
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ST JOSEPHS MEDICAL CENTER,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY
HOSPITAL
Board Certified Specialty: No
한국
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CARSON, LATISA
Provider ID: 206292
Provider Gender: Female
License Number: A72235
NPI: 1245229129
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Board Certified Specialty: No
한국
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org
/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DANESHMAND, SHAHRAM
Provider ID: 227411
Provider Gender: Male
License Number: A63844
NPI: 1891867412
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT
HOSPITAL, SHARP MEMORIAL HOSPITAL, ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL, MARY BIRCH HOSP FOR
D2. 初級保健名錄

WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4050 BEYER BLVD SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
DANESHMAND, SHAHRAM
Provider ID: 206292
Provider Gender: Male
License Number: A63844
NPI: 1891867412
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRICITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY
DANESHMAND, SHAHRAM
Provider ID: 206292
Provider Gender: Male
License Number: A63844
NPI: 1891867412
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL

DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRICITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM SA 8:30AM-2:00PM

OBSTETRICS / GYNECOLOGY
DANESHMAND, SHAHRAM
Provider ID: 227411
Provider Gender: Male
License Number: A63844
NPI: 1891867412
Provider English Spoken: Y
Provider Language(s)
Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN
D2. 初級保健名錄

Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, TRICITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DINH, MY
Provider ID: 227411
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DINH, MY
Provider ID: 206292
Provider Gender: Female
License Number: 20A9907
NPI: 1316146996
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Website: syhealth.org/clinics/san-ysidro-health-center
D2. 初級保健名錄

- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
GOLDSTEIN, EDWARD
Provider ID: 227411
Provider Gender: Male
License Number: G20087
NPI: 1982617494
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
GOMEZ, DANIELA
Provider ID: 227411
Provider Gender: Female
License Number: A175006
NPI: 1255878997
 Provider English Spoken: Y
 Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-1948
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
GOMEZ, DANIELA
Provider ID: 227411
Provider Gender: Female
License Number: A175006
NPI: 1255878997
 Provider English Spoken: Y
 Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
 Phone: (619) 662-4100
 Fax: (619) 205-1948
 After Hours Phone: (619) 662-4100
 Website: syhealth.org/clinic
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

Your PCP’s doctor group may have their own network mental health service providers. Please see the list below. You can contact these providers directly. Some services may require prior authorization from the mental health service provider before being covered.

To online access the mental health service provider list, please visit blueshieldca.com/fad.
D2. 初級保健名錄

Hours: M-F 8:30AM-5:00PM

**OBSTETRICS / GYNECOLOGY**

**GOMEZ, DANIELA**
Provider ID: 206292
Provider Gender: Female
License Number: A175006
NPI: 1255878997
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No

4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

**OBSTETRICS / GYNECOLOGY**

**JENKINS, ENCHANTA**
Provider ID: 227411
Provider Gender: Female
License Number: C143625
NPI: 1285604702
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**OBSTETRICS / GYNECOLOGY**

**MAJERSKI GONZALEZ, MANDY**
Provider ID: 227411
Provider Gender: Female
License Number: A113914
NPI: 1982812392
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR

1561
D2. 初級保健名錄

Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

OBSTETRICS / GYNECOLOGY
MAJERSKI GONZALEZ, MANDY
Provider ID: 227411
Provider Gender: Female
License Number: A113914
NPI: 1982812392
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
MENDEZ, DIEGO
Provider ID: 227411
Provider Gender: Male
License Number: A47906
NPI: 1437181922
 Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: MERCY GENERAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, BAKERSFIELD MEMORIAL HOSP, SHARP MEMORIAL HOSPITAL, Adventist Health Bakersfield, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, KERN MEDICAL CENTER
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

OBSTETRICS / GYNECOLOGY
SEFA-BOAKYE, KOFI
Provider ID: 206292
Provider Gender: Male
License Number: G59670
NPI: 1902993660
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
SHORT, ABIADE
Provider ID: 206292
Provider Gender: Male
License Number: A114893
NPI: 1750559589
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

OPHTHALMOLOGY
MANI, NASRIN
Provider ID: 227469
Provider Gender: Female
License Number: A40473
NPI: 1023061314
Provider English Spoken: Y
Provider Language(s)
   Spoken: Arabic, Faroese, Farsi, Persian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

OPHTHALMOLOGY
SKAF, AYHAM
Provider ID: 227469
Provider Gender: Male
License Number: A120584
NPI: 1285888628
Provider English Spoken: Y
Provider Language(s)
   Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
D2. 初級保健名錄

N

Accessibility: CONTACT PROVIDER

PEDIATRICS

ACEVEDO, SUSANA
Provider ID: 227411
Provider Gender: Female
License Number: A74960
NPI: 1801971569
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND
Provider ID: 227411
Provider Gender: Male
License Number: A49307
NPI: 1982662193
Provider English Spoken: Y
Provider Language(s): Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

ACEVEDO, SUSANA
Provider ID: 227411
Provider Gender: Female
License Number: A74960
NPI: 1801971569
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND
Provider ID: 206292
Provider Gender: Male
License Number: A49307
NPI: 1982662193
Provider English Spoken: Y
Provider Language(s): Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS

BARBADILLO, FERDINAND
Provider ID: 227411
Provider Gender: Male
License Number: A49307
NPI: 1982662193
Provider English Spoken: Y
Provider Language(s): Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
PEDIATRICS
BARBADILLO, FERDINAND
Provider ID: 206292
Provider Gender: Male
License Number: A49307
NPI: 1982662193
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-5:30PM

PEDIATRICS
CABARLO, JEHRIB
Provider ID: 227411
Provider Gender: Male
License Number: 20A8516
NPI: 1770661340
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Hospital Affiliation: Rady
CHILDREN'S HOSPITAL SAN DIEGO
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal- child- health- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
CHAIT LLAMAS, LWBBA
Provider ID: 227411
Provider Gender: Female
License Number: A138938
NPI: 1134567530
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Hospital Affiliation: Pioneers
MEMORIAL HOSPITAL
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal- child- health- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DIEGO
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal- child- health- center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
PEDIATRICS
CHAIT LLAMAS, LWBBA
Provider ID: 227411
Provider Gender: Female
License Number: A138938
NPI: 1134567530
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Board Certified Specialty: No
- 4050 BEYER BLVD
- SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: syhealth.org/clinics/maternal-child-health-center
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PEDIATRICS
FUJII, CINDY
Provider ID: 227411
Provider Gender: Female
License Number: G52183
NPI: 1871664821
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Board Certified Specialty: No
- 4050 BEYER BLVD
- SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: syhealth.org/clinics/maternal-child-health-center
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PEDIATRICS
GHAHREMANI, SIMIN
Provider ID: 206292
Provider Gender: Female
License Number: C51110
NPI: 1508904657
- Provider English Spoken: Y
- Provider Language(s) Spoken: Farsi
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
- 4004 BEYER BLVD
- SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- After Hours Phone: (619) 662-4100
- Website: www.syhealth.org/clinics/san-ysidro-health-center
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

PEDIATRICS
GHAHREMANI, SIMIN
Provider ID: 206292
Provider Gender: Female
License Number: C51110
NPI: 1508904657
- Provider English Spoken: Y
- Provider Language(s) Spoken: Farsi
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA
D2. 初級保健名錄

MED CTR, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
HERMAN, ANDREA
Provider ID: 227411
Provider Gender: Female
License Number: A72721
NPI: 1518970037
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
NISSAN, BETI
Provider ID: 206292
Provider Gender: Female
License Number: A64487
NPI: 1396705299
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, HOLLYWOOD PRESBYTERIAN MED CTR, SHARP MEMORIAL HOSPITAL
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
NISSAN, BETI
Provider ID: 206292
Provider Gender: Female
License Number: A64487
NPI: 1396705299
Provider English Spoken: Y
Provider Language(s)

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供
者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D2. 初級保健名錄

Spoken: Farsi, Persian
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Hollywood Presbyterian Medical Center, Sharp Memorial Hospital
Board Certified Specialty: No
- 4004 Beyer Blvd
  SAN YSIDRO, CA 92173
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: www.syhealth.org/clinics/san-ysidro-health-center
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

PEDIATRICS
PIANSAY, MARIA CORAZON
Provider ID: 206292
Provider Gender: Female
License Number: A93785
NPI: 1669680351
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish, Tagalog
  Cultural Competency: N
Hospital Affiliation: Sharp Chula Vista Medical Center, Scripps Mercy Hospital Chula Vista
Board Certified Specialty: No
- 4004 Beyer Blvd
  SAN YSIDRO, CA 92173
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: www.syhealth.org/clinics/san-ysidro-health-center
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

PEDIATRICS
RODRIGUEZ, ALDO
Provider ID: 227411
Provider Gender: Male
License Number: A134995
NPI: 1508209651
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Portuguese, Spanish
  Cultural Competency: N
Hospital Affiliation: Scripps Memorial Hospital
Board Certified Specialty: No
- 4050 Beyer Blvd
  SAN YSIDRO, CA 92173
  Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Website: syhealth.org/clinics/maternal-child-health-center
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

1569
初級保健名錄

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
RUELAS, ROBERTO
Provider ID: 227411
Provider Gender: Male
License Number: A170141
NPI: 1194257386
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4050 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SAHMS, TIMOTHY
Provider ID: 206292
Provider Gender: Male
License Number: G51462
NPI: 1780697276
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RODY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1948
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PEDIATRICS
SAHMS, TIMOTHY
Provider ID: 227411
Provider Gender: Male
License Number: G51462
NPI: 1780697276
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Board Certified Specialty: No
4004 Beyer Blvd
San Ysidro, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SHAHIDYAZDANI, TINA
Provider ID: 227411
Provider Gender: Female
License Number: A94813
NPI: 1891924858
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4050 Beyer Blvd
San Ysidro, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
SULLIVAN, ELISSA
Provider ID: 227411
Provider Gender: Female
License Number: A169577
NPI: 1790216422
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4050 Beyer Blvd
San Ysidro, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: syhealth.org/clinics/maternal-child-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

- **SULLIVAN, ELISSA**
  - Provider ID: 227411
  - Provider Gender: Female
  - License Number: A169577
  - NPI: 1790216422
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: TRI CITY MEDICAL CTR
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:30AM-5:00PM

- **TAYLOR, TASHA**
  - Provider ID: 227411
  - Provider Gender: Female
  - License Number: A82187
  - NPI: 1528144433
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Hospital Affiliation: TRI CITY MEDICAL CTR
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- **BUCKNER, JOSEPH**
  - Provider ID: 206292
  - Provider Gender: Male
  - License Number: PA18363
  - NPI: 1215909205
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: TRI CITY MEDICAL CTR
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

**PHYSICIANS ASSISTANT**

**BUCKNER, JOSEPH**
- Provider ID: 206292
- Provider Gender: Male
- License Number: PA18363
- NPI: 1215909205
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: TRI CITY MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\150
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**PHYSICIANS ASSISTANT**

GI, HUNG
Provider ID: 206292
Provider Gender: Male
License Number: PA16994
NPI: 1023207404
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese, French, Spanish
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san- ysidro- health - center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

HARMIS, NATASHA
Provider ID: 227469
Provider Gender: Female
License Number: PA58672
NPI: 1013516996
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KAMOTO, LYNN
Provider ID: 206292
Provider Gender: Female
License Number: PA17162
NPI: 1447326459
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

**PHYSICIANS ASSISTANT**

**KAMOTO, LYNN**

Provider ID: 206292  
Provider Gender: Female  
License Number: PA17162  
NPI: 1447326459

Provider English Spoken: Y  
Provider Language(s): Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org/clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**PHYSICIANS ASSISTANT**

**PORTO MADURSKI, KRISTINE**

Provider ID: 227411  
Provider Gender: Female  
License Number: PA16269  
NPI: 1053403782

Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**PHYSICIANS ASSISTANT**

**ROSS, COLLIN**

Provider ID: 206292  
Provider Gender: Male  
License Number: PA16058  
NPI: 1053403782

Provider English Spoken: Y  
Provider Language(s): Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org/clinics/maternal-child-health-center

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org /clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT  
SHARPE, NORMA  
Provider ID: 206292  
Provider Gender: Female  
License Number: PA20490  
NPI: 1619100237  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org /clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT  
SMITH, DOUGLAS  
Provider ID: 206292  
Provider Gender: Male  
License Number: PA12304  
NPI: 1902016611  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org /clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT  
SUNA SITTO, MOHEEN  
Provider ID: 227469  
Provider Gender: Female  
License Number: PA22855  
NPI: 1497196729  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: www.syhealth.org /clinics/san-ysidro-health-center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

PHYSICIANS ASSISTANT
SUNA SITTO, MOHEEN
Provider ID: 227469
Provider Gender: Female
License Number: PA22855
NPI: 1497196729
Provider Language Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
TRUJILLO, MIGUEL
Provider ID: 206292
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
Provider Language Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
TRUJILLO, MIGUEL
Provider ID: 206292
Provider Gender: Male
License Number: PA15656
NPI: 1285806794
Provider Language Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST
MANCHEL, BRUCE
Provider ID: 227469
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
Provider English Spoken: Y
Provider Language Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PODIATRIST
MANCHEL, BRUCE
Provider ID: 206292
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
Provider English Spoken: Y
Provider Language Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
D2. 初級保健名錄

CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
.providers
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: www.syhealth.org/clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

PODIATRIST
MANCHEL, BRUCE
Provider ID: 206292
Provider Gender: Male
License Number: DPM2930
NPI: 1790890788
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR
Board Certified Specialty: No
.providers
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
CLARK, SKYLAR
Provider ID: 227469
Provider Gender: Female
License Number: PT302385
NPI: 1457089187
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
.providers
3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: https://www.syhealth.org/locations
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Hours: M-F 8:00AM-5:00PM

REGISTERED PHYSICAL THERAPIST
TORRES, JOANN
Provider ID: 206292
Provider Gender: Female
License Number: PT296607
NPI: 1134732522
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST
HILL, CARLA
Provider ID: 206292
Provider Gender: Female
License Number: SP9075
NPI: 1043950751
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
TORRES, JOANN
Provider ID: 206292
Provider Gender: Female
License Number: PT296607
NPI: 1134732522
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SPEECH PATHOLOGIST
HILL, CARLA
Provider ID: 206292
Provider Gender: Female
License Number: SP9075
NPI: 1043950751
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SURGERY GENERAL
OKWUOSA, CHRIS
Provider ID: 206292
Provider Gender: Male
License Number: A170738
NPI: 1114336260
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Providence St Mary Medical Center
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: www.syhealth.org /clinics/san-ysidro-health-center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
HOURS: M-F 8:00AM-5:30PM
SA 8:30AM-2:00PM

SURGERY GENERAL
OKWUOSA, CHRI
Provider ID: 206292
Provider Gender: Male
License Number: A170738
NPI: 1114336260
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Providence St Mary Medical Center
Board Certified Specialty: No
9600 CUYAMACA ST STE 101
SANTEE, CA 92071
Phone: (619) 749-2150
Fax: (619) 456-9744
After Hours Phone: (619) 749-2150
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\n150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
MANGINE, REGINA
Provider ID: 366456
Provider Gender: Female
NPI: 1417177577
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp for Women and Newborns
Board Certified Specialty: No
9600 CUYAMACA ST STE 101
SANTEE, CA 92071
Phone: (619) 749-2150
Fax: (619) 456-9744
After Hours Phone: (619) 749-2150
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
LEONARD, BEVERLY
Provider ID: 206361
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Accessibility: CONTACT PROVIDER

PEDIATRICS
ARLATA, TAMANHTA
Provider ID: 615945
Provider Gender: Female
NPI: 1568721934
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical CTR
Board Certified Specialty: No
9600 CUYAMACA ST STE 101
SANTEE, CA 92071
Phone: (619) 749-2150
Fax: (619) 456-9744
After Hours Phone: (619) 749-2150
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

SPRING VALLEY

CERTIFIED NURSE PRACTITIONER
LEONARD, BEVERLY
Provider ID: 206361
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Accessibility: CONTACT PROVIDER

PEDIATRICS
MANGINE, REGINA
Provider ID: 366456
Provider Gender: Female
NPI: 1417177577
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Grossmont Hospital, Sharp Mary Birch Hosp for Women and Newborns
Board Certified Specialty: No
9600 CUYAMACA ST STE 101
SANTEE, CA 92071
Phone: (619) 749-2150
Fax: (619) 456-9744
After Hours Phone: (619) 749-2150
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
LEONARD, BEVERLY
D2. 初級保健名錄

Provider ID: 206361
Provider Gender: Female
License Number: NP10943
NPI: 1285772392
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
WILLIAMS, TAKISHA
Provider ID: 206361
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
WILLIAMS, TAKISHA
Provider ID: 206361
Provider Gender: Female
License Number: NP95013978
NPI: 1881727386
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
BACHARACH, REBECCA
Provider ID: 206361
Provider Gender: Female
License Number: 20A15459
NPI: 1225442643
- Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CARDONES, ARTHUR
Provider ID: 206361
Provider Gender: Male
D2. 初級保健名錄

License Number: A55932
NPI: 1962436451
Pocket Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
CONSTANTINO, STEPHANIE
Provider ID: 206361
Provider Gender: Female
License Number: A149063
NPI: 1366824971
Pocket Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

FAMILY PRACTICE
CARDONES, ARTHUR
Provider ID: 206361
Provider Gender: Male
License Number: A55932
NPI: 1962436451
Pocket Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
ROSE, PATRICIA
Provider ID: 206361
Provider Gender: Female
License Number: A76059
NPI: 1588677314
Pocket Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

© Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

この文書は日本語で書かれています。
FAMILY PRACTICE

ROSE, PATRICIA
Provider ID: 206361
Provider Gender: Female
License Number: A76059
NPI: 1588677314

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT SPRING VALLEY, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

Accessibility: CONTACT PROVIDER
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
Fax: (619) 462-5584
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

FQHC
GROSSMONT SPRING VALLEY
FAMILY HLTH CTRS INC,
Provider ID: 206361
NPI: 1508801069

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

Accessibility: CONTACT PROVIDER
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
Fax: (619) 462-5584
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY

ALIMONOS, LYSISTRATI
Provider ID: 206361
Provider Gender: Female
License Number: 20A14919
NPI: 1619397031

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

Accessibility: CONTACT PROVIDER
8788 JAMACHA RD

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

Accessibility: CONTACT PROVIDER
8788 JAMACHA RD
D2. 初級保健名錄

SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
BUECHNER, CHARLENE
Provider ID: 206361
Provider Gender: Female
License Number: A68463
NPI: 1376663831
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA,
SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Board Certified Specialty: No

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 206361
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL,
CITY MEDICAL CTR
Board Certified Specialty: No

8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CARTER, KHALIL
Provider ID: 206361
Provider Gender: Male
License Number: A113001
NPI: 1225231582
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
D2. 初級保健名錄

MERCY HOSPITAL, GROSSMONT HOSPITAL, TRICITY MEDICAL CTR
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
CERVANTES, SANDRA
Provider ID: 206361
Provider Gender: Female
License Number: A118095
NPI: 1073701041
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
Provider ID: 206361
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
CHAKRABARTI, PRIYA
Provider ID: 206361
Provider Gender: Female
License Number: A163464
NPI: 1326531401
Provider English Spoken: Y
Provider Language(s)
D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DE MIK, TRAVIS
Provider ID: 206361
Provider Gender: Male
License Number: A108228
NPI: 1629277322
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
DORUELO, ASHLEY
Provider ID: 206361
Provider Gender: Female
License Number: A178499
NPI: 1033613732
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
FOLCH TORRES-AGUIAR,
D2. 初級保健名錄

BEATRIZ
Provider ID: 206361
Provider Gender: Female
License Number: A148014
NPI: 1457794752
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
Sharp Grossmont Hospital,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
HANLEY, LAUREN
Provider ID: 206361
Provider Gender: Female
License Number: C174771
NPI: 1053392035
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, Sharp Grossmont Hospital
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
LIPSCHITZ, LISA
D2. 初級保健名錄

Provider ID: 206361
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
- Phone: (619) 515-2555
- After Hours Phone: (619) 515-2555
- Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
LOEFFLER, ALLISON
Provider ID: 206361
Provider Gender: Female
License Number: A116680
NPI: 1700073962
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
- Phone: (619) 515-2555
- After Hours Phone: (619) 515-2555
- Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
LIPSCHITZ, LISA
Provider ID: 206361
Provider Gender: Female
License Number: A72005
NPI: 1649208711
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
- Phone: (619) 515-2555
- After Hours Phone: (619) 515-2555
- Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM
D2. 初級保健名錄

DEL
Provider ID: 206361
Provider Gender: Female
License Number: A114181
NPI: 1740514249
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
MELENDEZ BERRIOS, IARA
DEL
Provider ID: 206361
Provider Gender: Female
License Number: A114181
NPI: 1740514249
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL,
GROSSMONT HOSPITAL
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

OBSTETRICS / GYNECOLOGY
RODRIGUEZ JEREZ, ROBERTO
Provider ID: 206361
Provider Gender: Male
License Number: A154298
NPI: 1710316450
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SHARP
CORONADO HOSP AND
HEALTHCARE CTR,
GROSSMONT HOSPITAL
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
OBSTETRICS / GYNECOLOGY
SAPRA, SONIA
Provider ID: 206361
Provider Gender: Female
License Number: A164859
NPI: 1952751711
Provider English Spoken: Yes
Provider Language(s) Spoken: Hindi
Cultural Competency: No
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www fhcsd org
Email: angelad@fhcsd org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
STABEN, REBECCA
Provider ID: 206361
Provider Gender: Female
License Number: 20A13958
NPI: 1932269198
Provider English Spoken: Yes
Cultural Competency: No
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www fhcsd org
Email: angelad@fhcsd org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 206361
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Sharp Grossmont Hospital
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www fhcsd org
Email: angelad@fhcsd org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER

Website: www fhcsd org
Email: angelad@fhcsd org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER

Website: www fhcsd org
Email: angelad@fhcsd org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER

Website: www fhcsd org
Email: angelad@fhcsd org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
D2. 初級保健名錄

Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
ZIEG, ALAN
Provider ID: 206361
Provider Gender: Male
License Number: G78814
NPI: 1699790634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM

OBSTETRICS / GYNECOLOGY
WINESBURG, JENNIFER
Provider ID: 206361
Provider Gender: Female
License Number: 20A11535
NPI: 1811162456
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, GROSSMONT HOSPITAL, DESERT REGIONAL MED CTR
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150

PEDIATRICS
JI, AMANDA
Provider ID: 206361
D2. 初級保健名錄

Provider Gender: Female
License Number: A169342
NPI: 1750745493

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PHYSICIANS ASSISTANT
TRAN, TU-UYEN
Provider ID: 206361
Provider Gender: Female
License Number: PA54588
NPI: 1598293748
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Board Certified Specialty: No
8788 JAMACHA RD
SPRING VALLEY, CA 91977
Phone: (619) 515-2555
After Hours Phone: (619) 515-2555
Website: www.fhcsd.org
Email: angelad@fhcsd.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M 8:30AM-5:30PM
TU 8:30AM-7:00PM
W-F 8:30AM-5:30PM

Valley Center
Clinic Outpatient Neighborhood Healthcare
Provider ID: 519918
NPI: 1437335148
Provider English Spoken: Y
Cultural Competency: N
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
D2. 初級保健名錄

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CLINIC OUTPATIENT
NEIGHBORHOOD
HEALTHCARE,
Provider ID: 519918
NPI: 1437335148
Provider English Spoken: Y
Cultural Competency: N
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
AYON MARTINEZ, CARLOS
Provider ID: 519918
Provider Gender: Male
License Number: A114419
NPI: 1154583128
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

FAMILY PRACTICE
CASTANER, ZALYA
Provider ID: 519918
Provider Gender: Female
License Number: A139490
NPI: 1487072179
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Board Certified Specialty: No
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9912
After Hours Phone: (760) 742-9912
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
### D2. 初級保健名錄

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<thead>
<tr>
<th>FAMILY PRACTICE</th>
<th>SCHULTZ, JAMES</th>
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<tbody>
<tr>
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<tr>
<td>Provider Gender: Male</td>
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<tr>
<td>License Number: G61829</td>
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<tr>
<td>Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, PALOMAR MEDICAL CENTER</td>
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<td>Board Certified Specialty: No</td>
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<tr>
<td>28477 LIZARD ROCKS RD VALLEY CENTER, CA 92082</td>
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| Hours: M-F 8:00AM-5:00PM |

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<td>28477 LIZARD ROCKS RD VALLEY CENTER, CA 92082</td>
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<tr>
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| Hours: M-F 8:00AM-5:00PM |

<table>
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<th>PEDIATRICS CRAYCHEE, LEO</th>
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<tbody>
<tr>
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<td>Provider Gender: Male</td>
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<tr>
<td>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</td>
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<td>Board Certified Specialty: No</td>
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<tr>
<td>28714 VALLEY CENTER RD STE L VALLEY CENTER, CA 92082</td>
</tr>
<tr>
<td>Phone: (760) 749-7770</td>
</tr>
</tbody>
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| 1593 |
D2. 初級保健名錄

Fax: (760) 751-9988
After Hours Phone: (760) 749-7770
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

PHYSICIANS ASSISTANT
AGUEY, OMAR
Provider ID: 519918
Provider Gender: Male
License Number: PA18708
NPI: 1851479372
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
28477 LIZARD ROCKS RD VALLEY CENTER, CA 92082
Phone: (760) 742-9919
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PHYSICIANS ASSISTANT
AGUEY, OMAR
Provider ID: 519918
Provider Gender: Male
License Number: PA18708
NPI: 1851479372
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
28477 LIZARD ROCKS RD VALLEY CENTER, CA 92082
Phone: (760) 742-9919
After Hours Phone: (760) 742-9919
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

VISTA

CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 400339
Provider Gender: Female
License Number: NP95006826
NPI: 1619246907
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Board Certified Specialty: No
134 GRAPEVINE RD VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

1594
D2. 初級保健名錄

CERTIFIED NURSE PRACTITIONER
SCHAEPE, RHODORA
Provider ID: 400339
Provider Gender: Female
License Number: RN410247
NPI: 1700974789
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
SCHAEPE, RHODORA
Provider ID: 400339
Provider Gender: Female
License Number: NP7791
NPI: 1700974789
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
SCHAEPE, RHODORA
Provider ID: 400339
Provider Gender: Female
License Number: RN410247
NPI: 1700974789
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
SCHAEPE, RHODORA
Provider ID: 400339
Provider Gender: Female
License Number: RN410247
NPI: 1700974789
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
 TU 10:30AM-7:30PM
 W-F 8:00AM-5:00PM

CERTIFIED NURSE PRACTITIONER
WILLIAMS, JINA
Provider ID: 400339
D2. 初級保健名錄

Provider Gender: Female
License Number: NP95020624
NPI: 1225500259
 Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR
JU, NATHANIEL
Provider ID: 400339
Provider Gender: Male
License Number: DC32054
NPI: 1972883882
 Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FAMILY PRACTICE
NGUYEN, DANIELA
Provider ID: 664798
Provider Gender: Female
NPI: 1891069662
 Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
 Phone: (760) 631-5000
 Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
 Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CHIROPRACTOR
JU, NATHANIEL
Provider ID: 400339
Provider Gender: Male
License Number: DC32054
NPI: 1972883882
 Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
 Phone: (760) 631-5000
 After Hours Phone: (760) 631-5000
 Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

FQHC
VCC DURIAN,
Provider ID: 411518
NPI: 1851300123
 Provider English Spoken: Y
D2. 初級保健名錄

Cultural Competency: N
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (844) 308-5003
Fax: (760) 414-3892
After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

FQHC
VCC DURIAN,
Provider ID: 411518
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (844) 308-5003
Fax: (760) 414-3892
After Hours Phone: (844) 308-5003
Website: www.vistacommunityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM

FQHC
VISTA COMMUNITY CLINIC
GRAPEVINE,
Provider ID: 400339
NPI: 1851300123
Provider English Spoken: Y
Cultural Competency: N
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

GENERAL PRACTICE
RONAN, KEVIN
Provider ID: 400339
Provider Gender: Male
License Number: G77176
NPI: 1225017353
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GENERAL PRACTICE
RONAN, KEVIN
Provider ID: 400339
Provider Gender: Male
D2. 初級保健名錄

License Number: G77176
NPI: 1225017353

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
AMBI, RAMIN
Provider ID: 79901
Provider Gender: Male
NPI: 1659366292

Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Persian, Spanish
Cultural Competency: N
Board Certified Specialty: No

950 CIVIC CENTER DR STE A
VISTA, CA 92083

Phone: (760) 439-4839
Fax: (760) 439-4841

After Hours Phone: (760) 439-4839
Website: N/A
Email: RAMINAMANIMD@GMAIL.COM
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 9:00AM-4:00PM
W 9:00AM-0:00PM
TH-F 9:00AM-4:00PM

PEDIATRICS
AMBRO, STANLEY
Provider ID: 52269
Provider Gender: Male
NPI: 1891735676

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RACED CHILDREN'S HOSPITAL SAN DIEGO
Board Certified Specialty: No

2067 W VISTA WAY STE 180
VISTA, CA 92083

Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

PEDIATRICS
BEDROSIAN, DIANE
Provider ID: 80272
Provider Gender: Female
NPI: 1447323951

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
D2. 初級保健名錄

Board Certified Specialty: No
2067 W VISTA WAY STE 280
VISTA, CA 92083
Phone: (760) 941-3630
Fax: (760) 941-1214
After Hours Phone: (760) 941-3630
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 9:00AM-1:00PM

PEDIATRICS
HARTFORD, NICOLE
Provider ID: 411518
Provider Gender: Female
License Number: 20A14390
NPI: 1346530466
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommu
nityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
HARTFORD, NICOLE
Provider ID: 411518
Provider Gender: Female
License Number: 20A14390
NPI: 1346530466
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No
2067 W VISTA WAY STE 280
VISTA, CA 92083
Phone: (760) 941-3630
Fax: (760) 941-1214
After Hours Phone: (760) 941-3630
Website: www.vistacommu
nityclinic.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
KARP, MICHAEL
Provider ID: 95672
Provider Gender: Male
NPI: 1295808632
Provider English Spoken: Y
Cultural Competency: N
Board Certified Specialty: No
2067 W VISTA WAY STE 280
VISTA, CA 92083
Phone: (760) 941-3630
Fax: (760) 941-1214
After Hours Phone: (760) 941-3630
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PEDIATRICS
KRAK, MICHAEL
Provider ID: 23455
Provider Gender: Male
NPI: 1003989419
Provider English Spoken: Y
Provider Language(s)
D2. 初級保健名錄

Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR
Board Certified Specialty: Yes

2067 W VISTA WAY STE 280
VISTA, CA 92083
Phone: (760) 941-3630
Fax: (760) 941-1214
After Hours Phone: (760) 941-3630
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-6:00PM
SA 9:00AM-1:00PM

PEDIATRICS

LUSCHWITZ, BRIAN
Provider ID: 400339
Provider Gender: Male
License Number: A60517
NPI: 1205868510

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: www.vistacommunityclinic.org
Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM

PEDIATRICS

NAUDIN, VERONICA
Provider ID: 84118
Provider Gender: Female
NPI: 1093755878

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO
Board Certified Specialty: No

2067 W VISTA WAY STE 180
VISTA, CA 92083
Phone: (760) 945-3434
Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-0:00PM

PEDIATRICS

PERTL, URSULA
Provider ID: 593894
Provider Gender: Female
NPI: 1609947464

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES
Board Certified Specialty: No
2067 W VISTA WAY STE 180 VISTA, CA 92083
Phone: (760) 945-3434 Fax: (760) 945-6761
After Hours Phone: (760) 945-3434
Website: N/A Medi-Cal Open Panel: Yes
Min/Max Age: 0\19 American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9:00AM-2:00PM F 8:00AM-5:00PM SA 8:00AM-4:00PM

PHYSICIANS ASSISTANT
WEAVER, APRIL
Provider ID: 400339 Provider Gender: Female License Number: PA20775 NPI: 1063552800
Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N
Board Certified Specialty: No
134 GRAPEVINE RD VISTA, CA 92083
Phone: (760) 631-5000 After Hours Phone: (760) 631-5000 Website: www.vistacommunityclinic.org Email: credentialing@vcc.org
Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9:00AM-2:00PM F 8:00AM-5:00PM SA 8:00AM-4:00PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

ALPINE

OPTOMETRIST
AOTO, KIM
Provider ID: 268720
Board Certified Specialty: No
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

RICE, ELIZABETH
Provider ID: 304664
Board Certified Specialty: No
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
NPI: 1902470537
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

CARLSBAD

CERTIFIED NURSE PRACTITIONER

HOOPER, BONNIE
Provider ID: 275252
Board Certified Specialty: No
6010 HIDDEN VALLEY RD STE 120
CARLSBAD, CA 92011
Phone: (760) 884-5990
Fax: (760) 448-4404
After Hours Phone: (760) 884-5990
Provider Gender: Female
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

HEARING AID DEALER / SUPPLIER

DAVIS, KELLE
Provider ID: 268654
Board Certified Specialty: No
1820 MARRON RD STE 102
CARLSBAD, CA 92008
Phone: (760) 434-0125
Fax: (760) 434-4531
After Hours Phone: (760) 434-0125
Provider Gender: Female
NPI: 1902853344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

NEUROLOGY

YOSHII-CONTRERAS, JUNE
Provider ID: 296589
Board Certified Specialty: No
6010 HIDDEN VALLEY RD STE 200
CARLSBAD, CA 92011
Phone: (760) 631-3000
Fax: (760) 631-3016
After Hours Phone: (760) 631-3000
Provider Gender: Female
NPI: 1437441763
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS
MEMORIAL HOSPITAL,
PALOMAR MEDICAL CENTER,
TRI CITY MEDICAL CTR,
SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
 Website: N/A

OTOLARYNGOLOGY
DONALDSON, CHADWICK
Provider ID: 268146
Board Certified Specialty: No
2390 FARADAY AVE
CARLSBAD, CA 92008
 Phone: (858) 909-0770
Fax: (858) 909-0880
 After Hours Phone: (858) 909-0770
Provider Gender: Male
NPI: 1891743910
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
TEMECULA VALLEY HOSPITAL INC,
SCRIPPS MEMORIAL HOSPITAL,
SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL,
SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED

PHYSICIANS ASSISTANT
HERMANSON, KATHLEEN
Provider ID: 269004
Board Certified Specialty: No
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
 Phone: (760) 631-3000
Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
Provider Gender: Female
NPI: 1598160343
 Provider English Spoken: Y
 Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
INOCELDA, ANDREW
Provider ID: 269089
Board Certified Specialty: No
2390 FARADAY AVE
CARLSBAD, CA 92008
 Phone: (858) 909-0770
Fax: (858) 909-0880
 After Hours Phone: (858) 909-0770
Provider Gender: Male
NPI: 1497950208
 Provider English Spoken: Y
 Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
SHIMIZU, KELSIE MIDORI
Provider ID: 296819
Board Certified Specialty: No
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
 Phone: (760) 631-3000
Fax: (760) 631-3016
 After Hours Phone: (760) 631-3000
Provider Gender: Female
NPI: 1972107811
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation:
KECK HOSPITAL OF USC,
KENNETH NORRIS JR CANCER HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED
D3. 專業提供者目錄

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
WILAND, WINONA
Provider ID: 296809
Board Certified Specialty: No
2390 FARADAY AVE
CARLSBAD, CA 92008
Phone: (858) 909-0770
Fax: (858) 909-0880
After Hours Phone: (858) 909-0770
Provider Gender: Female
NPI: 1043967383
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
AMBROSE, CHRISTOPHER
Provider ID: 248010
Board Certified Specialty: No
3070 MADISON ST
CARLSBAD, CA 92008
Phone: (760) 434-6100
Fax: (760) 471-5139
After Hours Phone: (760) 471-5139
Provider Gender: Male
NPI: 1063461101
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
BOUTELLE, DAVID
Provider ID: 248307
Board Certified Specialty: No
3070 MADISON ST
CARLSBAD, CA 92008
Phone: (760) 434-6100
Fax: (760) 471-5139
After Hours Phone: (760) 434-6100
Provider Gender: Male
NPI: 1063461101
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL
BEN-HAIM, SHARONA
Provider ID: 244069
Board Certified Specialty: No
6010 HIDDEN VALLEY RD
STE 200
CARLSBAD, CA 92011
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942469663
Provider English Spoken: Y
D3. 專業提供者目錄

Provider Language(s)
- Spoken: Hebrew, Spanish
- Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

MEDICAL CARE PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

SURGERY NEUROLOGICAL
MURTHY, NIKHIL
- Provider ID: 299996
- Board Certified Specialty: No
- 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1710371273
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

SURGERY NEUROLOGICAL
PHAM, MARTIN
- Provider ID: 203510
- Board Certified Specialty: No
- 6010 HIDDEN VALLEY RD STE 200 CARLSBAD, CA 92011
- Phone: (619) 543-5540
- After Hours Phone: (619) 543-5540
- Provider Gender: Male
- NPI: 1609130921
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18\100
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

ANESTHESIOLOGY PAIN MANAGEMENT
DAIRO, BRANDON
- Provider ID: 299879
- Board Certified Specialty: No
- 340 4TH AVE STE 19 CHULA VISTA, CA 91910
- Phone: (619) 761-5308
- Fax: (619) 591-1910
- After Hours Phone: (619) 761-5308
- Provider Gender: Male
- NPI: 1689092470
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18\100
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
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<tr>
<td>752 MEDICAL CENTER CT STE 302 CHULA VISTA, CA 91911</td>
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<tr>
<td>Phone: (619) 421-3361 Fax: (619) 869-4378</td>
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CERTIFIED NURSE
PRACTITIONER
DE DIOS, SARAH
Provider ID: 302418
Board Certified Specialty: No
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 425-3840
Fax: (619) 425-3840
After Hours Phone: (619) 425-3840
Provider Gender: Female
NPI: 1528632742
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
GUADARRAMA, IGNACIO
Provider ID: 300304
Board Certified Specialty: No
880 THIRD AVESTE A
CHULA VISTA, CA 91911
Phone: (619) 662-4100
Fax: (619) 618-2035
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1821331174
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
KANTAS, PARIS
Provider ID: 293297
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1114329612
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP
CORONADO HOSP AND HEALTHCARE CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

**CERTIFIED NURSE PRACTITIONER**
LANE, KIMBERLY
Provider ID: 301598
Board Certified Specialty: No
752 MEDICAL CENTER CT
STE 101
CHULA VISTA, CA 91911
Phone: (619) 397-4500
Fax: (858) 429-7931
After Hours Phone: (619) 397-4500
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: BEVERLY HOSPITAL, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A

**EMERGENCY MEDICINE**
FRENCH, TONIANNE
Provider ID: 290538
Board Certified Specialty: No
333 H ST STE 2080
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1770578411
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A

**EMERGENCY MEDICINE**
EINSTEIN, ERIC
Provider ID: 290482
Board Certified Specialty: No
333 H ST STE 2080
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1154683787
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CORONA REGIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A

**EMERGENCY MEDICINE**
GALASSO, MADISON
Provider ID: 290495
Board Certified Specialty: Yes
333 H ST STE 2080
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1053766766
Provider English Spoken: Y
D3. 專業提供者目錄

- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\1999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:30AM-5:30PM
  SA 8:00AM-2:30PM
- Website: N/A

EMERGENCY MEDICINE
GRIESINGER, MICHAEL
Provider ID: 290537
Board Certified Specialty: No
333 H ST STE 2080
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1336556604
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ADVENTIST HEALTH BAKERSFIELD
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE
PHAM, LILY
Provider ID: 304935
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1811423072
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE
REARDON, JACQUELINE
Provider ID: 295890
Board Certified Specialty: No
333 H ST STE 2080
CHULA VISTA, CA 91910
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1619907581
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE
QUENZER, FAITH
Provider ID: 290637
Board Certified Specialty: No
333 H ST STE 2080
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1295112670
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MCT, UNIVERSITY HSP OF SAN DIEGO CO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE
REARDON, JACQUELINE
1610
### D3. 專業提供者目錄

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**ENDOCRINOLOGY**

**METABOLISM DIABETES**

**CARRILLO, MARITZA**

Provider ID: 290970  
Board Certified Specialty: No  
678 3RD AVE  
CHULA VISTA, CA 91910  
Phone: (619) 662-4100  
Fax: (619) 425-1184  
After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1649628587  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL  
 Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999

---

**FAMILY PRACTICE**

**HERNANDEZ, RALPH**

Provider ID: 300230  
Board Certified Specialty: No  
880 3RD AVE STE A  
CHULA VISTA, CA 91911  
Phone: (619) 662-4100  
Fax: (619) 618-2035  
After Hours Phone: (619) 662-4100  
Provider Gender: Male  
NPI: 1285782151  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes
| Provider ID: 303517 | Board Certified Specialty: No | 1637 THIRD AVE STE B CHULA VISTA, CA 91911 | Phone: (619) 662-4100 | Fax: (619) 205-1376 | After Hours Phone: (619) 662-4100 | Provider Gender: Male | NPI: 1396373619 | Provider English Spoken: Yes | Cultural Competency: N | Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL | Medi-Cal Open Panel: Yes | Min/Max Age: 0\999 | American Sign Language (ASL): N | Accessibility: CONTACT PROVIDER | Website: N/A |
|-------------------|-----------------------------|-----------------------------------------------|------------------------|-------------------------|---------------------------------|------------------------|------------------------|----------------------------------|----------------------------------|----------------------------------|------------------------|----------------------------------|----------------------------------|----------------------------------|---------------------------------|------------------------|----------------------------------|----------------------------------|----------------------------------|
| Provider ID: 305471 | Board Certified Specialty: No | 678 3RD AVE CHULA VISTA, CA 91910 | Phone: (619) 662-4100 | Fax: (619) 425-1184 | After Hours Phone: (619) 662-4100 | Provider Gender: Female | NPI: 1972732584 | Provider English Spoken: Yes | Provider Language(s): Spanish | Cultural Competency: N | Hospital Affiliation: SCRIPPS MERCY HOSPITAL | Medi-Cal Open Panel: Yes | Min/Max Age: 18\999 | American Sign Language (ASL): N | Accessibility: CONTACT PROVIDER | Website: N/A |

**FAMILY PRACTICE**

**LOZANO, JUAN**

Provider ID: 303517

Board Certified Specialty: No

1637 THIRD AVE STE B-F-H-I

Phone: (619) 662-4100

Fax: (619) 205-1376

After Hours Phone: (619) 662-4100

Provider Gender: Male

NPI: 1396373619

Provider English Spoken: Yes

Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

**FAMILY PRACTICE**

**VELASQUEZ, SHARON**

Provider ID: 299164

Board Certified Specialty: No

678 3RD AVE CHULA VISTA, CA 91910

Phone: (619) 662-4100

Fax: (619) 425-1184

After Hours Phone: (619) 662-4100

Provider Gender: Female

NPI: 1972732584

Provider English Spoken: Yes

Provider Language(s): Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

**GASTROENTEROLOGY**

**NOVO, MEGAN**

Provider ID: 296068

Board Certified Specialty: No

296 H ST STE 301

CHULA VISTA, CA 91910

Phone: (619) 266-3332

Fax: (619) 266-6000

After Hours Phone: (619) 266-3332

Provider Gender: Female

NPI: 1770961971

Provider English Spoken: Yes

Cultural Competency: N

Hospital Affiliation: PARADISE VALLEY HOSPITAL, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD MEDICAL CTR, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:30AM-5:30PM

SA 8:00AM-2:30PM

Website: N/A
D3. 專業提供者目錄

GASTROENTEROLOGY
SHAFFER, KATHERINE
Provider ID: 305510
Board Certified Specialty: No
296 H ST STE 301
CHULA VISTA, CA 91910
Phone: (619) 266-3332
After Hours Phone: (619) 266-3332
Provider Gender: Female
NPI: 1336405695
Provider Language(s)
Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HEARING AID DEALER / SUPPLIER
ANDERSON, ELAINE
Provider ID: 268688
Board Certified Specialty: No
310 3RD AVE STE C11
CHULA VISTA, CA 91910
Phone: (619) 426-0841
Fax: (619) 426-9197
After Hours Phone: (619) 426-0841
Provider Gender: Female
NPI: 1063558856
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GENERAL PRACTICE
SAMI, REMAN
Provider ID: 295214
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1295362242
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
WIENER, GREGORY
Provider ID: 257480
Board Certified Specialty: Yes
353 CHURCH AVE STE A
CHULA VISTA, CA 91910
Phone: (619) 585-8883
Fax: (619) 585-8892
After Hours Phone: (619) 585-8883
Provider Gender: Male
NPI: 1811099534
Provider English Spoken: Y
426-0841
Provider Gender: Female
NPI: 1902853344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): 


HEMATOLOGY / ONCOLOGY
ITURBE-ALESSIO, IGNACIO
Provider ID: 297145
Board Certified Specialty: No
855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Phone: (619) 745-1031
Fax: (619) 745-1032
After Hours Phone: (619) 745-1031
Provider Gender: Male
NPI: 1972513695
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY
JOHNSON, KENNETH
Provider ID: 262288
Board Certified Specialty: No
769 MEDICAL CENTER CT
STE 202
CHULA VISTA, CA 91911
Phone: (619) 482-8430
Fax: (619) 482-8005
After Hours Phone: (619) 482-8430
Provider Gender: Male
NPI: 1063527711
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL
Moder-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY
MOOLANI, RAMESH
Provider ID: 297928
Board Certified Specialty: No
855 3RD AVE STE 3330
CHULA VISTA, CA 91911
Phone: (619) 745-1031
Fax: (619) 745-1032
After Hours Phone: (619) 745-1031
Provider Gender: Male
NPI: 1437272010
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA

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Your PCP’s medical group may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note that certain services may require mental health service providers to obtain Blue Shield prior authorization before being covered.

For online access to the mental health service provider list, please visit blueshieldca.com/fad.
<table>
<thead>
<tr>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
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<td>No</td>
<td>SHARP CHULA VISTA MED CTR</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
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<td>Male</td>
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<tr>
<td>290568</td>
<td>No</td>
<td>SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, LOMA LINDA UNIVERSITY MED CTR</td>
<td>Yes</td>
<td>18\999</td>
<td>N</td>
<td>1023246212</td>
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<td>245576</td>
<td>No</td>
<td>SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, Adventist Health and Rideout</td>
<td>Yes</td>
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<td>Spanish, Swahili</td>
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<td>247625</td>
<td>No</td>
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<td>Yes</td>
<td>18\999</td>
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**D3. 專業提供者目錄**

VISTA, LOMA LINDA UNIVERSITY MED CTR

**MEDICARE**

MURRIETA, SHARP CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**INTERNAL MEDICINE**

**NAIDZIONAK, ULADZISLAU**

Provider ID: 290568

Board Certified Specialty: No

750 MEDICAL CENTER CT STE 9

CHULA VISTA, CA 91911

Phone: (619) 421-6922

Fax: (619) 421-5569

After Hours Phone: (619) 421-6922

Provider Gender: Male

NPI: 1023246212

Provider English Spoken: Y

Provider Language(s) Spoken: Russian

Cultural Competency: N

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**

Provider ID: 245576

Board Certified Specialty: No

765 MEDICAL CENTER CT STE 211

CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619) 616-2100

Provider Gender: Male

NPI: 1386896736

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A

**INTERVENTIONAL CARDIOLOGY**

**NAGHI, JESSE**

Provider ID: 247625

Board Certified Specialty: No

752 MEDICAL CENTER CT STE 207

CHULA VISTA, CA 91911

Phone: (619) 867-0557

Fax: (619) 867-0558

After Hours Phone: (619) 867-0557

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEDICAL CENTER CHULA VISTA, SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A

**INTERVENTIONAL CARDIOLOGY**

**MOHAMEDALI, BURHAN**

Provider ID: 245576

Board Certified Specialty: No

765 MEDICAL CENTER CT STE 211

CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619) 616-2100

Provider Gender: Male

NPI: 1386896736

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP CHULA VISTA MED CTR, Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A

**INTERVENTIONAL CARDIOLOGY**

**NAGHI, JESSE**

Provider ID: 247625

Board Certified Specialty: No

752 MEDICAL CENTER CT STE 207

CHULA VISTA, CA 91911

Phone: (619) 867-0557

Fax: (619) 867-0558

After Hours Phone: (619) 867-0557

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP MEDICAL CENTER CHULA VISTA, SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 9:00AM-5:00PM

Website: N/A
D3. Professional Provider Directory

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Arabic, Bulgarian, Russian, Spanish, Tagalog
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0-999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A

### INTERVENTIONAL CARDIOLOGY

**ROUGH, STEVEN**

- **Provider ID:** 298442
- **Board Certified Specialty:** No
- **754 MEDICAL CENTER CT STE 101 CHULA VISTA, CA 91911**
- **Phone:** (619) 434-4288
- **Fax:** (619) 434-4315
- **After Hours Phone:** (619) 434-4288
- **Provider Gender:** Male
- **NPI:** 1386821460
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSP MED CTR
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0-999
- **American Sign Language (ASL):** N

**SHEREV, DIMITRI**

- **Provider ID:** 268950
- **Board Certified Specialty:** No
- **752 MEDICAL CENTER CT STE 207 CHULA VISTA, CA 91911**
- **Phone:** (619) 867-0557
- **Fax:** (619) 867-0558
- **After Hours Phone:** (619) 867-0557
- **Provider Gender:** Male
- **NPI:** 1154323996
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Bulgarian, Russian, Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, ALVARADO COMMUNITY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0-999
D3. 專業提供者目錄

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY
SUDHAKAR, DEEPTHI
Provider ID: 296051
Board Certified Specialty: No
765 MEDICAL CENTER CT STE 211
CHULA VISTA, CA 91911
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Female
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
MELBER, DORA
Provider ID: 296993
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s): Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
MCCULLOUGH, DEIRDRE
Provider ID: 277263
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s):
Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

PROVIDER

• Hours: M-F
  8:00AM-5:00PM

• Website: N/A

MATERNAL AND FETAL
MEDICINE

REIMERS, REBECCA
Provider ID: 294653
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL
MEDICINE

RICHARDSON, ALVIE
Provider ID: 264687
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Memorial Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL
MEDICINE

FLEMING, SARAH
Provider ID: 205646
Board Certified Specialty: No
435 H ST
CHULA VISTA, CA 91910
Phone: (619) 691-7000
After Hours Phone: (619) 691-7000
Provider Gender: Female
NPI: 1679809826
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

NEONATAL / PERINATAL MEDICINE
MATOBA, NANA
Provider ID: 297976
Board Certified Specialty: No
435 H ST
CHULA VISTA, CA 91910
Phone: (619) 691-7000
Fax: (619) 260-7055
After Hours Phone: (619) 691-7000
Provider Gender: Female
NPI: 1801952197
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NYMAN, KATHERINE
Provider ID: 301823
Board Certified Specialty: No
435 H ST
CHULA VISTA, CA 91910
Phone: (619) 691-7000
Fax: (619) 260-7055
After Hours Phone: (619) 691-7000
Provider Gender: Female
NPI: 1003260951
Provider English Spoken: Y
Provider Language(s) Spoken: Y
Cultural Competency: N
Hospital Affiliation: Scripps Memorial Hospital, Scripps Mercy Hospital Chula Vista, Rady Children's Hospital San Diego, Southwest Healthcare Inland Valley Hospital, Southwest Healthcare Rancho Springs Hospital, Scripps Mercy Hospital, UCSD Medical Ctr, UCSD Medical Ctr, Scripps Memorial Hospital Encinitas
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. Professional Provider Directory

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<th>Hours: M-F</th>
<th>8:00AM-5:00PM</th>
<th>Website: N/A</th>
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**NEPHROLOGY**

**HOREISH, ADAM**
Provider ID: 290100
Board Certified Specialty: No
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Male
NPI: 1760461206
Provider English Spoken: Y
Provider Language(s):
  Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

**NEPHROLOGY**

**HOREISH, ADAM**
Provider ID: 99947
Board Certified Specialty: No
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Male
NPI: 1760461206
Provider English Spoken: Y
Provider Language(s):
  Spoken: Arabic, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

**NEPHROLOGY**

**MOOLANI, UJJALA**
Provider ID: 296069
Board Certified Specialty: No
752 MEDICAL CENTER CT STE 302
CHULA VISTA, CA 91911
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Female
NPI: 1528221421
Provider English Spoken: Y
Provider Language(s):
  Spoken: Hindi, Sindhi, Spanish, Urdu
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

1620
NEPHROLOGY

MOOLANI, UJJALA
Provider ID: 295915
Board Certified Specialty: No
752 MEDICAL CENTER CT STE 302
CHULA VISTA, CA 91911
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Female
NPI: 1528221421
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Sindhi, Spanish, Urdu
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

NEPHROLOGY

PATEL, AMAR
Provider ID: 245639
Board Certified Specialty: No
340 4TH AVE STE 4
CHULA VISTA, CA 91910
Phone: (619) 427-1144
Fax: (619) 427-1185
After Hours Phone: (619) 427-1144
Provider Gender: Female
NPI: 1235629932
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

NEPHROLOGY

VIDEEN, JOHN
Provider ID: 290110
Board Certified Specialty: No
752 MEDICAL CENTER CT STE 302
CHULA VISTA, CA 91911
Phone: (619) 421-3361
Fax: (619) 869-4378
After Hours Phone: (619) 421-3361
Provider Gender: Male
NPI: 1043318199
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR,
SHARP CORONADO HOSP AND HEALTHCARE CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

NEPHROLOGY

VIDEEN, JOHN
### D3. 專業提供者目錄

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<tr>
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<tr>
<td>After Hours Phone:</td>
<td>(619) 421-3361</td>
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<td>Provider English Spoken:</td>
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<td>Cultural Competency:</td>
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<tr>
<td>Hospital Affiliation:</td>
<td>SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, PARADISE VALLEY HOSPITAL</td>
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<tr>
<td>Medi-Cal Open Panel:</td>
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<tr>
<td>Min/Max Age:</td>
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<td>American Sign Language (ASL):</td>
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<td>Hours:</td>
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<td>Website:</td>
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### NEPHROLOGY

#### VIDEEN, JOHN

<table>
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<tr>
<th>Provider ID:</th>
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<tbody>
<tr>
<td>Board Certified Specialty:</td>
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</tr>
<tr>
<td>752 MEDICAL CENTER CT</td>
<td></td>
</tr>
<tr>
<td>STE 302</td>
<td></td>
</tr>
<tr>
<td>CHULA VISTA, CA 91911</td>
<td></td>
</tr>
<tr>
<td>Phone:</td>
<td>(619) 421-3361</td>
</tr>
<tr>
<td>Fax:</td>
<td>(619) 869-4378</td>
</tr>
<tr>
<td>After Hours Phone:</td>
<td>(619) 421-3361</td>
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<td>Provider Gender:</td>
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#### YUAN, HENRY

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<tr>
<td>340 4TH AVE STE 4</td>
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<tr>
<td>CHULA VISTA, CA 91910</td>
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</tr>
<tr>
<td>Phone:</td>
<td>(619) 427-1144</td>
</tr>
<tr>
<td>Fax:</td>
<td>(619) 427-1185</td>
</tr>
<tr>
<td>After Hours Phone:</td>
<td>(619) 427-1144</td>
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<td>Provider Gender:</td>
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<td>1043442379</td>
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<td>Hospital Affiliation:</td>
<td>SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL, Providence St Joseph Hospital, Providence St Jude Medical Center, SOUTH COAST GLOBAL MEDICAL CENTER INC, ENCOMPASS HEALTH REHABILITATION HOSPITAL OF TUSTIN, Foothill Regional Medical Center, Foothill Regional Medical Center, KINDRED HOSPITAL BREA, KINDRED HOSPITAL LA MIRADA, KINDRED HOSPITAL SANTA ANA</td>
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### NEUROLOGY

#### HOSSEIN ZADEH MALEKI, ANA

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<tr>
<td>450 FOURTH AVE STE 215</td>
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<tr>
<td>CHULA VISTA, CA 91910</td>
<td></td>
</tr>
<tr>
<td>Phone:</td>
<td>(619) 425-3840</td>
</tr>
<tr>
<td>Fax:</td>
<td>(619) 485-5440</td>
</tr>
<tr>
<td>After Hours Phone:</td>
<td>(619) 425-3840</td>
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<tr>
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<td>Hospital Affiliation:</td>
<td>TEMECULA VALLEY HOSPITAL INC</td>
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<td>American Sign Language (ASL):</td>
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NEUROLOGY

MOHAMMAD, AHMAD SHAH
Provider ID: 127244
Board Certified Specialty: No
750 MEDICAL CENTER CT STE 6
CHULA VISTA, CA 91911
Phone: (619) 337-7900
Fax: (619) 337-7902
After Hours Phone: (619) 337-7900
Provider Gender: Male
NPI: 1902973472
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Farsi, French, German, Pushto, Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SORIA LOPEZ, JOSE
Provider ID: 295744
Board Certified Specialty: No
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 425-3840
Fax: (619) 485-5440
After Hours Phone: (619) 425-3840
Provider Gender: Male
NPI: 1225474034
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA, JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA, JOHN SALLY THORNTON, SCRIPPS MERCY HOSPITAL CHULA VISTA, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM F 8:00AM-0:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

ATIGA, SCHUBERT
Provider ID: 268953
Board Certified Specialty: Yes
752 MEDICAL CENTER CT STE 106
CHULA VISTA, CA 91911
Phone: (619) 482-8406
Fax: (619) 482-6656
After Hours Phone: (619) 482-8406
Provider Gender: Male
NPI: 1033138714
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

482-8406
Provider Gender: Male
NPI: 1033138714
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

1623
Min/Max Age: 13\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM F 8:00AM-0:00PM
Website: N/A

**OCCUPATIONAL THERAPIST**

**MORRIS, SHEILA**
Provider ID: 268926
Board Certified Specialty: No
1020 TIERRA DEL REY STE A-1 CHULA VISTA, CA 91910
Phone: (619) 585-7104 Fax: (619) 585-7106
After Hours Phone: (619) 585-7104
Provider Gender: Female NPI: 1689039877
Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM TU 7:00AM-5:00PM W 8:00AM-5:00PM TH-F 7:00AM-5:00PM
Website: N/A

**OPHTHALMOLOGY**

**BRYANT, DUANE**
Provider ID: 244753
Board Certified Specialty: No
342 F ST CHULA VISTA, CA 91910
Phone: (619) 422-1471 Fax: (619) 422-0450
After Hours Phone: (619) 422-1471
Provider Gender: Male NPI: 1023117124
Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
OPTOMETRIST
CHASE, PEI CHI
Provider ID: 297621
Board Certified Specialty: No
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-2025
After Hours Phone: (619) 422-1471
Provider Gender: Female
NPI: 1730676727
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
KOO, ANITA
Provider ID: 304537
Board Certified Specialty: No
835 THIRD AVE
CHULA VISTA, CA 91911
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1669825667
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
MASCARENO, EFRAIN
Provider ID: 262228
Board Certified Specialty: No
2260 OTAY LAKES RD STE 111
CHULA VISTA, CA 91915
Phone: (619) 421-5550
Fax: (866) 254-5707
After Hours Phone: (619) 421-5550
Provider Gender: Male
NPI: 1457507279
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
MASCARENO, EFRAIN
Provider ID: 268679
Board Certified Specialty: No
2260 OTAY LAKES RD STE 111
CHULA VISTA, CA 91915
Phone: (619) 421-5550
Fax: (866) 254-5707
After Hours Phone: (619) 421-5550
Provider Gender: Male
NPI: 1457507279
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

Board Certified Specialty: No
440 4TH AVE STE 9
CHULA VISTA, CA 91910
Phone: (619) 427-2020
Fax: (866) 254-5707
After Hours Phone: (619) 427-2020
Provider Gender: Male
NPI: 1457507279
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-6:00PM
Website: N/A

OPTOMETRIST
NGUYEN, THU
Provider ID: 298022
Board Certified Specialty: No
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619) 422-1471
Provider Gender: Female
NPI: 1326323627
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPTOMETRIST
MASCARENO, EFRAIN
Provider ID: 268680
Board Certified Specialty: No
440 4TH AVE STE 9
CHULA VISTA, CA 91910
Phone: (619) 427-2020
Fax: (866) 254-5707
After Hours Phone: (619) 427-2020
Provider Gender: Male
NPI: 1457507279
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-6:00PM
Website: N/A

OPTOMETRIST
NGUYEN, THU
Provider ID: 125032
Board Certified Specialty: No
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-0450
After Hours Phone: (619) 422-1471
Provider Gender: Female
NPI: 1326323627
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
OPTOMETRIST
RICHARDSON, JULIA
Provider ID: 297645
Board Certified Specialty: No
Office: 342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-2025
After Hours Phone: (619) 422-1471
Provider Gender: Female
NPI: 1770154528
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPTOMETRIST
TRAN, JESSICA
Provider ID: 304888
Board Certified Specialty: No
Office: 340 FOURTH AVE STE 19
CHULA VISTA, CA 91910
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619) 761-5308
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPTOMETRIST
SCOVILL, ALEXANDRA
Provider ID: 297625
Board Certified Specialty: No
Office: 342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 422-0114
After Hours Phone: (619) 422-1471
Provider Gender: Female
NPI: 1184146094
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
MCCALLION, PATRICK
Provider ID: 290541
Board Certified Specialty: No
Office: 765 MEDICAL CENTER CT STE 210
CHULA VISTA, CA 91911
Phone: (619) 482-0565
Fax: (619) 482-2775
After Hours Phone: (619) 482-0565
Provider Gender: Male
NPI: 1518456508
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
D3. 專業提供者目錄

9:00AM-5:00PM  
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
AGHILI, ROXANA  
Provider ID: 303782  
Board Certified Specialty: No  
386 E H ST STE 202  
CHULA VISTA, CA 91910  
Phone: (858) 966-1720  
Fax: (858) 966-1725  
After Hours Phone: (858) 966-1720  
Provider Gender: Female  
NPI: 1285014498  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RASY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: SU 1:00PM-10:00PM  
M-F 4:00PM-10:00PM  
SA 1:00PM-10:00PM  
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
BETTY, MARYANN  
Provider ID: 245751  
Board Certified Specialty: No  
386 E H ST STE 202  
CHULA VISTA, CA 91910  
Phone: (858) 966-1720  
Fax: (858) 966-1725  
After Hours Phone: (858) 966-1720  
Provider Gender: Female  
NPI: 12851927883  
Provider English Spoken: Y  
Provider Language(s) Spoken: Farsi  
Cultural Competency: N  
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RASY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
DEVERA, GEMMIE  
Provider ID: N/A  
Board Certified Specialty: No  
386 E H ST STE 202  
CHULA VISTA, CA 91910  
Phone: (858) 966-1720  
Fax: (858) 966-1725  
After Hours Phone: (858) 966-1720  
Provider Gender: Female  
NPI: 12366622078  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RASY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
GORHAM, LAURA  
Provider ID: 275787  
Board Certified Specialty: No  
386 E H ST STE 202  
CHULA VISTA, CA 91910  
Phone: (858) 966-1720  
Fax: (858) 966-1725  
After Hours Phone: (858) 966-1720  
Provider Gender: Female  
NPI: 1316162324  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RASY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
GROSS, MATTHEW  
Provider ID: 297176  
Board Certified Specialty: No
D3. Professional Provider Directory

**PEDIATRIC EMERGENCY MEDICINE**

**MENDES, CHANTAL**
Provider ID: 295669
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1134681265
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**VAIDYA, KAMALA**
Provider ID: 289411
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1689646689
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDREN'S HOSPITAL, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**OZAKI, YOSHIHIRO**
Provider ID: 241923
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Male
NPI: 1467898239
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDREN'S HOSPITAL, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**MINKA, GENEVIEVE**
Provider ID: 289468
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1689646689
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
Provider ID: 289411
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1689646689
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDREN'S HOSPITAL, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**MINKA, GENEVIEVE**
Provider ID: 289468
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1689646689
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**OZAKI, YOSHIHIRO**
Provider ID: 241923
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Male
NPI: 1467898239
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDREN'S HOSPITAL, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**MENDES, CHANTAL**
Provider ID: 295669
Board Certified Specialty: No
386 E H ST STE 202
CHULA VISTA, CA 91910
Phone: (858) 966-1720
Fax: (858) 966-1725
After Hours Phone: (858) 966-1720
Provider Gender: Female
NPI: 1134681265
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
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<th>Board Certified Specialty</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
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<th>Accessibility</th>
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<td>RICHARDSON, HENRY</td>
<td>295275</td>
<td>No</td>
<td>RODY CHILDRENS HOSPITAL SAN DIEGO</td>
<td>Yes</td>
<td>0\19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
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<td>ROWHANI, NAGHMEH</td>
<td>306065</td>
<td>No</td>
<td>280 E ST CHULA VISTA, CA 91910</td>
<td>Yes</td>
<td>18\999</td>
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<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
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<td>DOUGHERTY, CLARA</td>
<td>301592</td>
<td>No</td>
<td>752 MEDICAL CENTER CT STE 101 CHULA VISTA, CA 91911</td>
<td>Yes</td>
<td>18\999</td>
<td>Spanish</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
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D3. 专业提供者目录

Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
GI, HUNG
Provider ID: 302126
Board Certified Specialty: No
280 E ST
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1023207404
Provider English Spoken: Y
Provider Language(s): Chinese, French, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
INDA, PRISCILLA
Provider ID: 265072
Board Certified Specialty: No
450 4TH AVE STE 215
CHULA VISTA, CA 91910
Phone: (619) 434-0204
Fax: (619) 337-0191
After Hours Phone: (619) 434-0204
Provider Gender: Female
NPI: 1679008379
Provider English Spoken: Y
Provider Language(s): Arabic, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
VARGAS, CHRISTOPHER
Provider ID: 295945
Board Certified Specialty: No
2452 FENTON ST STE C101
CHULA VISTA, CA 91914
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619) 600-5309
Provider Gender: Male
NPI: 1922505775
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\110
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

PHYSICIANS ASSISTANT
VARGAS, CHRISTOPHER
Provider ID: 268744
Board Certified Specialty: No
2452 FENTON ST STE C203
CHULA VISTA, CA 91914
Phone: (619) 600-5309
Fax: (619) 655-4700
After Hours Phone: (619) 600-5309
Provider Gender: Male
NPI: 1922505775
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 21\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
Fax: (619) 655-4700
After Hours Phone: (619) 600-5309
Provider Gender: Male
NPI: 1922505775
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
WRIGHT, DEREK
Provider ID: 302389
Board Certified Specialty: No
1240 FOURTH AVESTE 19
CHULA VISTA, CA 91910
Phone: (619) 761-5308
Fax: (619) 591-1910
After Hours Phone: (619) 761-5308
Provider Gender: Male
NPI: 1629674858
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-4:30PM
Website: N/A

PODIATRIST
READ, TRENTON
Provider ID: 296655
Board Certified Specialty: No
855 3RD AVE STE 1100
CHULA VISTA, CA 91911
Phone: (619) 631-4033
Fax: (619) 880-5057
After Hours Phone: (619) 631-4033
Provider Gender: Male
NPI: 1952963431
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
PSYCHOLOGIST

BAYLON, ALDO
Provider ID: 290243
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-6941
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1649429150
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM
Website: N/A

PSYCHOLOGIST

GALLO, LINDA
Provider ID: 296782
Board Certified Specialty: No
780 BAY BLVD STE 200
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 240-7852
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1427773621
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A

PSYCHOLOGIST

WIJAYARATNE, IMANIE
Provider ID: 290092
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 271-0260
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1932358355
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PROVIDER

Hours: M-F
9:00AM-5:00PM
Website: N/A

PSYCHOLOGIST

CELAYA, PATRICIA
Provider ID: 294875
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1952656902
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PSYCHOLOGIST

GOULD, HILARY
Provider ID: 290467
Board Certified Specialty: No
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 271-0260
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1104297696
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

RADIATION ONCOLOGY
CARMONA, RUBEN
Provider ID: 303101
Board Certified Specialty: No
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Phone: (858) 939-5010
Fax: (619) 740-8499
After Hours Phone: (858) 939-5010
Provider Gender: Male
NPI: 1275929242
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL,
PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIATION ONCOLOGY
COLEMAN, LORI
Provider ID: 206393
Board Certified Specialty: No
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Male
NPI: 1225186232
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
GROSSMONT MEDICAL CENTER,
GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
GROSSMONT HOSPITAL,
GROSSMONT MEMORIAL HOSPITAL,
Palm Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIATION ONCOLOGY
VOLPP, PAUL
Provider ID: 221102
Board Certified Specialty: No
769 MEDICAL CENTER CT
CHULA VISTA, CA 91911
Phone: (619) 502-5851
Fax: (619) 502-5865
After Hours Phone: (619) 502-5851
Provider Gender: Male
NPI: 1841233947
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
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Your PCP's doctor group may have its own network of mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, some services may require your mental health service provider to receive prior authorization from Blue Shield for coverage.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
D3. 專業提供者目錄

PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
HERMAN, RACHEL
Provider ID: 301376
Board Certified Specialty: No
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1477121762
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
HERMAN, RACHEL
Provider ID: 286656
Board Certified Specialty: No
880 THIRD AVE STE A
CHULA VISTA, CA 91911
Phone: (619) 205-4585
Fax: (619) 271-3183
After Hours Phone: (619) 205-4585
Provider Gender: Female
NPI: 1063170603
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 55\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-7:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
JAIN, ALEXANDRA
Provider ID: 305150
Board Certified Specialty: No
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1477121762
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
KARANDE, PRACHI
Provider ID: 301380
Board Certified Specialty: No
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1699357525
Provider English Spoken: Y
Cultural Competency: N
D3. 專業提供者目錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
KARANDE, PRACHI
Provider ID: 287100
Board Certified Specialty: No
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1699357525
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
NGUYEN, TIA
Provider ID: 305014
Board Certified Specialty: No
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1457136269
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
NOVENCIDO, ANDREW
Provider ID: 301994
Board Certified Specialty: No
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
NOVENCIDO, ANDREW
Provider ID: 286782
Board Certified Specialty: No
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
D3. Professional Provider Directory

☑ After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
☑ Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
SPARKS, TODD
Provider ID: 129142
Board Certified Specialty: No
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
☑ After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1265481139
☑ Provider English Spoken: Y
☑ Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
☑ Hours: M 7:00AM-7:00PM
TU 7:00AM-0:00PM
W-TH 7:00AM-7:00PM
F 7:00AM-0:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
STAHL, KEVIN
Provider ID: 301418
Board Certified Specialty: No
1392 E PALOMAR ST STE 503
CHULA VISTA, CA 91913
Phone: (619) 482-3000
Fax: (619) 482-3001
☑ After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1760194302
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
☑ Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

- **Website**: N/A

**REGISTERED PHYSICAL THERAPIST**

**VILLANUEVA, GIOVANNI**

Provider ID: 301532

Board Certified Specialty: No

1392 E PALOMAR ST STE 503

CHULA VISTA, CA 91913

Phone: (619) 482-3000

Fax: (619) 482-3001

After Hours Phone: (619) 482-3000

Provider Gender: Male

NPI: 1063046878

- **Provider English Spoken**: Y
- **Provider Language(s)**: Spoken: Spanish
- **Cultural Competency**: N
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0-999

**SPEECH PATHOLOGIST**

**AROCO-SALGADO, MIRELIS**

Provider ID: 296928

Board Certified Specialty: No

333 H ST STE 5000

CHULA VISTA, CA 91910

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877) 757-8353

Provider Gender: Female

NPI: 1063660165

- **Provider English Spoken**: Y
- **Provider Language(s)**: Spoken: Tagalog
- **Cultural Competency**: N
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 18-999

**RHEUMATOLOGY**

**CHITKARA, PUJA**

Provider ID: 268780

Board Certified Specialty: No

765 MEDICAL CENTER CT STE 216

CHULA VISTA, CA 91911

Phone: (619) 623-3000

Fax: (619) 623-3001

After Hours Phone: (619) 623-3000

Provider Gender: Male

NPI: 1285989236

- **Provider English Spoken**: Y
- **Provider Language(s)**: Spoken: Spanish
- **Cultural Competency**: N
- **Hospital Affiliation**: SCRIPPS GREEN HOSPITAL, SHARP CHULA VISTA MED CTR
- **Medi-Cal Open Panel**: Yes
- **Min/Max Age**: 0-999

**SPEECH PATHOLOGIST**

**CALDERON MORALES, ASTRID**

Provider ID: 305582

Board Certified Specialty: No

333 H ST STE 5000

CHULA VISTA, CA 91910

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877) 757-8353

Provider Gender: Female

NPI: 1619501186

- **Provider English Spoken**: Y
D3. 專業提供者目錄

- **Provider Language(s)**
  - Spoken: Armenian, Spanish

- **Cultural Competency**: N

- **Medi-Cal Open Panel**: Yes

- **Min/Max Age**: 18-999

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

- **Accessibility**: CONTACT PROVIDER

- **Hours**: M-F 7:00AM-7:00PM

- **Website**: N/A

**SPEECH PATHOLOGIST**

**CLARK, MELISSA**

Provider ID: 296923

- Board Certified Specialty: No

- Phone: (877) 757-8353

- Fax: (818) 357-2505

- After Hours Phone: (877) 757-8353

Provider Gender: Female

NPI: 1760546428

- Provider English Spoken: Y

- Provider Language(s): Spoken: Arabic, Armenian, Farsi, Spanish

- Cultural Competency: N

- Medi-Cal Open Panel: Yes

- Min/Max Age: 18-999

- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

- Hours: M-F 7:00AM-7:00PM

- Website: N/A

**O’DORAN, KAYLA**

Provider ID: 296587

- Board Certified Specialty: No

- Phone: (877) 757-8353

- Fax: (818) 357-2505

- After Hours Phone: (877) 757-8353

Provider Gender: Female

NPI: 1275021438

- Provider English Spoken: Y

- Provider Language(s): Spoken: Arabic, Armenian, Farsi, Spanish

- Cultural Competency: N

- Medi-Cal Open Panel: Yes

- Min/Max Age: 0-999

- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

- Hours: M-F 8:00AM-5:00PM

- Website: N/A

**SURGERY GENERAL**

**CASILLAS BERUMEN, SERGIO**

Provider ID: 304607

- Board Certified Specialty: No

- Phone: (619) 576-7007

- Fax: (619) 567-7775

- After Hours Phone: (619) 576-7007

Provider Gender: Male

NPI: 1437470762

- Provider English Spoken: Y

- Provider Language(s): Spoken: Spanish

- Cultural Competency: N

- Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER

- Medi-Cal Open Panel: Yes

- Min/Max Age: 0-999

- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER

- Hours: M-F 8:00AM-5:00PM

- Website: N/A

**SURGERY GENERAL**

**MORAL, JOHN**

Provider ID: 297841
D3. 專業提供者目錄

**SURGERY ORTHOPEDIC**

**KUSNEZOV, NICHOLAS**

Provider ID: 303195

Board Certified Specialty: No

750 MEDICAL CENTER CT STE 14
CHULA VISTA, CA 91911

Phone: (858) 824-1703
Fax: (858) 455-6473

After Hours Phone: (858) 824-1703

Provider Gender: Male

NPI: 1396185161

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TWIN CITIES COMMUNITY HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND

HEALTHCARE CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A
D3. 專業提供者目錄

Min/Max Age: 0\999
American Sign Language (ASL): N

[Accessibility: CONTACT PROVIDER]
[Hours: M-F 8:00AM-5:00PM]
[Website: N/A]

UROLOGY
SALMASI, AMIRALI
Provider ID: 302913
Board Certified Specialty: No
752 MEDICAL CENTER CT STE 101
CHULA VISTA, CA 91911
Phone: (619) 397-4500
After Hours Phone: (619) 397-4500
Provider Gender: Male
NPI: 1609187962
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

[Accessibility: CONTACT PROVIDER]
[Website: N/A]

CORONADO
CERTIFIED NURSE PRACTITIONER
LANE, KIMBERLY
Provider ID: 301599
Board Certified Specialty: No
230 PROSPECT PL STE 210
CORONADO, CA 92118
Phone: (619) 299-0670
Fax: (858) 429-7929
After Hours Phone: (619) 299-0670
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N

[Accessibility: CONTACT PROVIDER]
[Website: N/A]

HEARING AID DEALER / SUPPLIER
DAVIS, KELLE
Provider ID: 268655
Board Certified Specialty: No
801 ORANGE AVE
CORONADO, CA 92118
Phone: (619) 437-8154
Fax: (310) 989-3092
After Hours Phone: (619) 437-8154

[Accessibility: CONTACT PROVIDER]
[Hours: M-F 8:00AM-5:00PM]
[Website: N/A]
D3. 專業提供者目錄

Provider Gender: Female
NPI: 1902853344
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC
ANDRY, JAMES
Provider ID: 302087
Board Certified Specialty: No
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
DOUGHERTY, CLARA
Provider ID: 301587
Board Certified Specialty: No
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC
PALLIA, CHRISTOPHER
Provider ID: 302102
Board Certified Specialty: No
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
Email: INFO@PALLIAMD.COM

UROLOGY
SALMASI, AMIRALI
Provider ID: 302911
Board Certified Specialty: No
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Email: INFO@PALLIAMD.COM
D3. 專業提供者目錄

- Provider English Spoken: Y
  Provider Language(s) Spoken: Farsi
  Cultural Competency: N
  Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
  John Sally Thornton, Grossmont Hospital
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Website: N/A

EL CAJON

CARDIOVASCULAR DISEASE

Lerner, Jonathan
Provider ID: 303446
Board Certified Specialty: No
1625 E MAIN ST STE 201
EL CAJON, CA 92021
Phone: (619) 486-6512
Fax: (619) 616-2104
After Hours Phone: (619) 486-6512
Provider Gender: Male
NPI: 1962899823

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP CHULA VISTA MED CTR
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  Website: N/A

CERTIFIED ACUPUNCTURIST

Craft, Kevin
Provider ID: 290945
Board Certified Specialty: No
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (360) 462-2746
After Hours Phone: (619) 440-2751
Provider Gender: Male
NPI: 1659745610

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  Website: N/A

CERTIFIED NURSE PRACTITIONER

Brannen, Mandy
Provider ID: 241600
Board Certified Specialty: No
215 W MADISON AVE
EL CAJON, CA 92020
Phone: (619) 667-6125
Fax: (619) 590-9036
After Hours Phone: (619) 667-6125
Provider Gender: Female
NPI: 1891205159

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M 4:00PM-7:00PM
  W 4:00PM-7:00PM
  F 4:00PM-7:00PM
  Website: N/A

CERTIFIED NURSE PRACTITIONER

Chudacek, Janet
Provider ID: 241626

- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
- American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  Website: N/A
D3. 專業提供者目錄

Board Certified Specialty: No

215 W MADISON AVE
EL CAJON, CA 92020
Phone: (760) 737-6960
Fax: (760) 741-2782
After Hours Phone: (760) 737-6960
Provider Gender: Female
NPI: 1932606118

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

PIRTLE, KEYSHONE
Provider ID: 284244
Board Certified Specialty: No
5442 SYCUAN RD
EL CAJON, CA 92019
Phone: (619) 445-0707
Fax: (619) 445-9764
After Hours Phone: (619) 445-0707
Provider Gender: Male
NPI: 1417567827

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-2:00PM
TU-F 8:00AM-5:00PM
Website: N/A

CHIROPRACTOR

FULKS, ZACKARY
Provider ID: 303814
Board Certified Specialty: No
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 270-3600
Fax: (360) 462-2746
After Hours Phone: (619) 270-3600
Provider Gender: Male
NPI: 1407562531

Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
## D3. 專業提供者目錄

**FULKS, ZACKARY**  
Provider ID: 301146  
Board Certified Specialty: No  
855 E MADISON AVE  
EL CAJON, CA 92020  
Phone: (619) 270-3600  
Fax: (360) 462-2746  
After Hours Phone: (619) 270-3600  
Provider Gender: Male  
NPI: 1407562531  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

**CHIROPRACTOR**  
MCCOWN, BARRY  
Provider ID: 303815  
Board Certified Specialty: No  
855 E MADISON AVE  
EL CAJON, CA 92020  
Phone: (619) 440-2751  
Fax: (360) 462-2746  
After Hours Phone: (619) 440-2751  
Provider Gender: Male  
NPI: 1487781035  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

**FAMILY PRACTICE**  
ALGHAMDI, ASMA  
Provider ID: 300231  
Board Certified Specialty: No  
875 EL CAJON BLVD  
EL CAJON, CA 92020  
Phone: (619) 662-4100  
Fax: (619) 205-6305  
After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1316310840  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: SU 10:00AM-4:00PM  
M-F 8:30AM-5:30PM  
SA 8:00AM-2:30PM  
Website: N/A  

**CHIROPRACTOR**  
MCCOWN, BARRY  
Provider ID: 303849  
Board Certified Specialty: No  
470 N MOLLISON AVE  
EL CAJON, CA 92021  
Phone: (833) 867-4642  
Fax: (360) 462-5840  
After Hours Phone: (833) 867-4642  
Provider Gender: Male  
NPI: 1487781035  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: SU 10:00AM-4:00PM  
M-F 8:30AM-5:30PM  
SA 8:00AM-2:30PM  
Website: N/A  

**FAMILY PRACTICE**  
RONQUILLO, KAREN AN  
Provider ID: 304781  
Board Certified Specialty: No  
855 E MADISON AVE  
EL CAJON, CA 92020  
1646
### Gastroenterology

**Novo, Megan**

Provider ID: 296067  
Board Certified Specialty: No  
2732 Navajo Rd Ste 200  
El Cajon, CA 92020  
Phone: (619) 266-3332  
Fax: (619) 266-6000  
After Hours Phone: (619) 266-3332  
Provider Gender: Female  
NPI: 1770961971  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Paradise Valley Hospital, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, UCSD La Jolla John Sally Thornton, Scripps Mercy Hospital Chula Vista, University of California Irvine Med Ctr, UCSD Medical Ctr, UCSD Medical Ctr, Scripps Mercy Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

### Hearing Aid Dealer / Supplier

**Anderson, Elaine**

Provider ID: 268692  
Board Certified Specialty: No  
1767 E Main St  
El Cajon, CA 92021  
Phone: (619) 440-6516  
Fax: (619) 440-6547  
After Hours Phone: (619) 440-6516  
Provider Gender: Female  
NPI: 1063558856  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

### Internal Medicine

**Awdisho, Alan**

Provider ID: 291282  
Board Certified Specialty: No  
875 El Cajon Blvd  
El Cajon, CA 92020  
Phone: (619) 662-4100  
Fax: (619) 205-6305  
After Hours Phone: (619) 662-4100  
Provider Gender: Male  
NPI: 1164795498  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Scripps Memorial Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  

D3. 專業提供者目錄

INTERNAL MEDICINE
MANSOUR, DAVID
Provider ID: 291543
Board Certified Specialty: No
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (360) 462-2746
After Hours Phone: (619) 440-2751
Provider Gender: Male
NPI: 1689164949
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
MAY, LOUIS
Provider ID: 294916
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1467871673
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED CTR,
SHARP CHULA VISTA MED CTR,
TRI CITY MEDICAL CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
MICHAEL, RAMI
Provider ID: 294908
Board Certified Specialty: No
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1467871673
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED CTR,
SHARP CHULA VISTA MED CTR,
TRI CITY MEDICAL CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ACCESSIBILITY: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY
SHEREV, DIMITRI
Provider ID: 302988
Board Certified Specialty: No
1380 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 867-0557
After Hours Phone: (619) 867-0557
Provider Gender: Male
NPI: 1154323996
Provider English Spoken: Y
Provider Language(s) Spoken: Bulgarian, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
GROSSMONT HOSPITAL,
ALVARADO COMMUNITY HOSPITAL,
SHARP MEMORIAL HOSPITAL,
ALVARADO HOSPITAL LLC,
SHARP CHULA VISTA MED CTR,
SHARP CHULA VISTA MED CTR,
TRI CITY MEDICAL CTR,
SCRIPPS MERCY HOSPITAL CHULA VISTA,
Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
### D3. 專業提供者目錄

#### INTERVENTIONAL CARDIOLOGY

**SUDHAKAR, DEEPTHI**

Provider ID: 295843  
Board Certified Specialty: No  
Address: 1625 E MAIN ST STE 201  
EL CAJON, CA 92021  
Phone: (619) 486-6512  
Fax: (619) 616-2104  
After Hours Phone: (619) 486-6512  
Provider Gender: Female  
NPI: 1811307051

- Provider English Spoken: Y  
- Cultural Competency: N  
- Hospital Affiliation: Sharp Grossmont Hospital  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 12\999  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F  
  8:00AM-5:00PM  
- Website: N/A

#### OPTOMETRIST

**AOTO, KIM**

Provider ID: 268721  
Board Certified Specialty: No  
Address: 450 FLETCHER PKWY STE 112  
EL CAJON, CA 92020  
Phone: (800) 898-2020  
Fax: (844) 897-3788  
After Hours Phone: (800) 898-2020  
Provider Gender: Female  
NPI: 1780935650

- Provider English Spoken: Y  
- Provider Language(s)  
  Spoken: Arabic, Russian, Spanish  
- Cultural Competency: N  
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 18\110  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F  
  8:30AM-5:00PM  
- Website: N/A

#### OBSTETRICS / GYNECOLOGY

**SEAVEY, MICHELLE**

Provider ID: 302873  
Board Certified Specialty: No  
Address: 855 E MADISON AVE  
EL CAJON, CA 92020  
Phone: (619) 440-2751  
Fax: (360) 462-2746  
After Hours Phone: (619) 440-2751  
Provider Gender: Female  
NPI: 1114081833

- Provider English Spoken: Y  
- Cultural Competency: N  
- Hospital Affiliation: Sharp Grossmont Hospital  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\999  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F  
  8:00AM-5:00PM  
- Website: N/A

#### PHYSICIANS ASSISTANT

**INDA, PRISCILLA**

Provider ID: 265073  
Board Certified Specialty: No  
Address: 328 HIGHLAND AVE STE 200  
EL CAJON, CA 92020  
Phone: (619) 930-9404  
Fax: (619) 930-9426  
After Hours Phone: (619) 930-9404  
Provider Gender: Female  
NPI: 1679008379

- Provider English Spoken: Y  
- Provider Language(s)  
  Spoken: Vietnamese  
- Cultural Competency: N  
- Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\999  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F  
  8:00AM-5:00PM  
- Website: N/A

**LE, TAYLOR**

Provider ID: 304574  
Board Certified Specialty: No  
Address: 855 E MADISON AVE  
EL CAJON, CA 92020  
Phone: (619) 440-2751  
Fax: (360) 462-2746  
After Hours Phone: (619) 440-2751  
Provider Gender: Female  
NPI: 1396478400
<table>
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<th>職業</th>
<th>名稱</th>
<th>ID</th>
<th>譁定專科</th>
<th>活動年齡</th>
<th>經濟麻州開放</th>
<th>美國手語</th>
<th>接觸</th>
<th>電話</th>
<th>網站</th>
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<tbody>
<tr>
<td>医師助理</td>
<td>RAMOS, JACQUELYN</td>
<td>301106</td>
<td>沒有</td>
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<td>是</td>
<td>否</td>
<td>聯絡</td>
<td>(619) 270-3600</td>
<td>N/A</td>
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<tr>
<td>医師助理</td>
<td>ROSENBLATT, SHERI</td>
<td>305449</td>
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<td>否</td>
<td>聯絡</td>
<td>(619) 662-4100</td>
<td>N/A</td>
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<tr>
<td>心理學家</td>
<td>ARAIZA, ERNESTINA</td>
<td>290286</td>
<td>沒有</td>
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<td>否</td>
<td>聯絡</td>
<td>(619) 662-4100</td>
<td>N/A</td>
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<td>心理學家</td>
<td>GUARDADO-SOTO, RAQUEL</td>
<td>290309</td>
<td>沒有</td>
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<td>否</td>
<td>聯絡</td>
<td>(619) 667-6125</td>
<td>N/A</td>
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您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
## American Sign Language (ASL): N

<table>
<thead>
<tr>
<th>Provider</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
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<th>Provider English Spoken</th>
<th>Provider Language(s) Spoken</th>
<th>Cultural Competency</th>
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<td>Wheeler, Kim</td>
<td>302144</td>
<td>No</td>
<td>Yes</td>
<td>11\999</td>
<td>CONTACT PROVIDER</td>
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<td>Spanish</td>
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<td>No</td>
<td>Yes</td>
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<td>CONTACT PROVIDER</td>
<td>Y</td>
<td>Spanish</td>
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<td>Spanish</td>
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<td>Gonzalez, Andres</td>
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<td>Yes</td>
<td>18\999</td>
<td>CONTACT PROVIDER</td>
<td>Y</td>
<td>Spanish</td>
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**ENCINITAS**
CERTIFIED ACUPUNCTURIST
JULIAN, FIDES
Provider ID: 304133
Board Certified Specialty: No
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
CARDINELL, ANNA
Provider ID: 291412
Board Certified Specialty: No
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
CHAMBERS, KATRINA
Provider ID: 303521
Board Certified Specialty: No
781 GARDEN VIEW CT STE 100
ENCINITAS, CA 92024
Phone: (760) 183-0441
Fax: (760) 635-5972
After Hours Phone: (760) 183-0441
Provider Gender: Female
NPI: 1710695143
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
HEAD, KRISTIN
Provider ID: 268657
Board Certified Specialty: No
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1699078923
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

CERTIFIED NURSE
PRACTITIONER
DWYER, ERIN
Provider ID: 301447
Board Certified Specialty: No
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760) 436-4558
Provider Gender: Female
NPI: 1003260894
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HOOPER, BONNIE
Provider ID: 275253
Board Certified Specialty: No
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Female
NPI: 1821062878
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
LANE, KIMBERLY
Provider ID: 301602
Board Certified Specialty: No
320 SANTA FE DR STE 108
ENCINITAS, CA 92024
Phone: (760) 436-4558
Fax: (858) 429-7926
After Hours Phone: (760) 436-4558
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-8:00PM
M-F 8:00AM-8:00PM
SA 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
KORMANIK, PATRICIA
Provider ID: 281856
Board Certified Specialty: No
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093895047
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
PAKENHAM, KATE
Provider ID: 282071
Board Certified Specialty: No
1130 2ND ST
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1578299343
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
SRILASAK, MICHELE
Provider ID: 281856
Board Certified Specialty: No
1500 1ST ST
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

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如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D3. 專業提供者目錄

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<th>GASTROENTEROLOGY</th>
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<th>HOSPICE AND PALLIATIVE MEDICINE</th>
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D3. 專業提供者目錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
BALLAS, JERASIMOS
Provider ID: 209562
Board Certified Specialty: No 781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024 Phone: (858) 657-7200 After Hours Phone: (858) 657-7200 Provider Gender: Male NPI: 1871767384 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 16\999 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM Website: N/A

MATERNAL AND FETAL MEDICINE
HULL, ANDREW
Provider ID: 209483 Board Certified Specialty: No 781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024 Phone: (858) 657-7200 After Hours Phone: (858) 657-7200 Provider Gender: Male NPI: 1902862121 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM Website: N/A

MATERNAL AND FETAL MEDICINE
LAURENT, LOUISE
Provider ID: 208641 Board Certified Specialty: No 781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024 Phone: (858) 657-7200 After Hours Phone: (858) 657-7200 Provider Gender: Male NPI: 1770532707 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 16\999 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM Website: N/A

MATERNAL AND FETAL MEDICINE
MOORE, THOMAS
Provider ID: 208645 Board Certified Specialty: No 781 GARDEN VIEW CT STE 200 ENCINITAS, CA 92024 Phone: (858) 657-7200 After Hours Phone: (858) 657-7200 Provider Gender: Male NPI: 1184682379 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD
D3. 專業提供者目錄

MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
WOELKERS, DOUGLAS
Provider ID: 209384
Board Certified Specialty: No
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
Phone: (858) 657-7200
After Hours Phone: (858) 657-7200
Provider Gender: Female
NPI: 1013965748
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MEDICINE
WOLF, RICHARD
Provider ID: 209254
Board Certified Specialty: No
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
Phone: (858) 657-7200
After Hours Phone: (858) 657-7200
Provider Gender: Male
NPI: 1497713846
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
BAI-TONG, SHIYU
Provider ID: 283286
Board Certified Specialty: No
D3. 專業提供者目錄

NYMAN, KATHERINE
Provider ID: 301821
Board Certified Specialty: No

354 SANTA FE DR
ENCINITAS, CA 92024
Phone: (760) 633-6120
Fax: (760) 633-7385
After Hours Phone: (760) 633-6120
Provider Gender: Female
NPI: 1003260951
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 303905
Board Certified Specialty: No

354 SANTA FE DR
ENCINITAS, CA 92024
Phone: (760) 633-6120
Fax: (760) 633-7385
After Hours Phone: (760) 633-6120
Provider Gender: Male
NPI: 1538388988
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Scripps Mercy Hospital Chula Vista, Palomar Health, Scripps Memorial Hospital, Southwestern Healthcare Ranchos Springs Hospital, Southwestern Healthcare Ranchos Springs Hospital, Southwestern Healthcare Inland Valley Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY

BUI, JONATHAN
Provider ID: 269966
Board Certified Specialty: No

477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
Phone: (760) 944-6377
Fax: (760) 944-3927
After Hours Phone: (760) 944-6377
Provider Gender: Male
NPI: 1730247974
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

JINDAL, ANUJA
Provider ID: 206264
Board Certified Specialty: No

477 N EL CAMINO REAL
STE 302
ENCINITAS, CA 92024
D3. 專業提供者目錄

NEUROLOGY CHILD
KIM MCMANUS, OLIVIA
Provider ID: 206258
Board Certified Specialty: No
Phone: (760) 944-5545
Fax: (760) 944-5545
Provider Gender: Female
NPI: 1194046581
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
BINDER, PRATIBHA
Provider ID: 282167
Board Certified Specialty: No
Phone: (800) 926-8273
Fax: (888) 539-8781
Provider Gender: Female
NPI: 1174758031
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
 Hours: M-F
8:00AM-5:00PM
Website: N/A

**OBSTETRICS / GYNECOLOGY**

**DELCORE, LAURA**
Provider ID: 291325
Board Certified Specialty: No
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Provider Language(s): English
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
Provider ID: 293447
Board Certified Specialty: No
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Female
NPI: 1730507567
Provider English Spoken: Y
Provider Language(s): English
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**OBSTETRICS / GYNECOLOGY**

**LAMALE-SMITH, LEAH**
Provider ID: 208682
Board Certified Specialty: No
781 GARDEN VIEW CT STE 200
ENCINITAS, CA 92024
Phone: (858) 657-7200
After Hours Phone: (858) 657-7200
Provider Gender: Female
NPI: 1396904876
Provider English Spoken: Y
Provider Language(s): Spanish
American Sign Language (ASL): N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**
Provider ID: 293448
Board Certified Specialty: No
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Female
NPI: 1730507567
Provider English Spoken: Y
Provider Language(s): English
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
### Obstetrics / Gynecology

**Mackay, Gillian**  
Provider ID: 303061  
Board Certified Specialty: No  
1200 Garden View Rd  
Encinitas, CA 92024  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1558715268  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16-999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00 AM - 5:00 PM  
Website: N/A  
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical CTR, Southwest Healthcare Rancho Springs Hospital, Temecula Valley Hospital Inc, Loma Linda University Med CTR Murrieta  
Cultural Competency: N

**Shah, Nemi**  
Provider ID: 272578  
Board Certified Specialty: No  
1200 Garden View Rd  
Ste 100  
Encinitas, CA 92024  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1770702177  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16-999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00 AM - 5:00 PM  
Website: N/A  
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical CTR, Southwest Healthcare Rancho Springs Hospital, Temecula Valley Hospital Inc, Loma Linda University Med CTR Murrieta  
Cultural Competency: N

### Ophthalmology

**Bhatia, Shagun**  
Provider ID: 267315  
Board Certified Specialty: No  
477 N El Camino Real  
Ste D302  
Encinitas, CA 92024  
Phone: (760) 944-5545  
Fax: (760) 944-3927  
After Hours Phone: (760) 944-5545  
Provider Gender: Female  
NPI: 1104237353  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00 AM - 5:00 PM  
Website: N/A  
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical CTR, Rady Childrens
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
HENNEIN, LAUREN
Provider ID: 297012
Board Certified Specialty: No
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego,
Grossmont Hospital, Sharp Memorial Hospital, UCSF Benioff
Children's Hospital Oakland, Scripps Mercy Hospital,
Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
MOLL, ANGELA
Provider ID: 205507
Board Certified Specialty: No
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-3927
After Hours Phone: (760) 944-5545
Provider Gender: Male
NPI: 1497792220
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego,
Scripps Mercy Hospital, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
MOVAGHAR, MANSOOR
Provider ID: 216413
Board Certified Specialty: No
477 N EL CAMINO REAL
BLD D STE 302
ENCINITAS, CA 92024
Phone: (760) 944-5545
After Hours Phone: (760) 944-5545
Provider Gender: Male
Hospital Affiliation:
Grossmont Hospital,
Scripps Mercy Hospital,
Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

D3. 專業提供者目錄
D3. 專業提供者目錄

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**OPTOMETRIST**

**AOTO, KIM**

Provider ID: 296797  
Board Certified Specialty: No  
320 SANTA FE DR STE 104  
ENCINITAS, CA 92024  
Phone: (760) 943-7141  
Fax: (760) 943-0371  
After Hours Phone: (760) 943-7141  
Provider Gender: Female  
NPI: 1780935650  
Provider English Spoken: Y  
Provider Language(s): Vietnamese  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**OTOLARYNGOLOGY**

**LEUIN, SHELBY**

Provider ID: 206112  
Board Certified Specialty: No  
477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024  
Phone: (760) 944-5545  
Fax: (760) 944-3927  
After Hours Phone: (760) 944-5545  
Provider Gender: Female  
NPI: 1124230909  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**FRIESEN, TZYNNONG**

Provider ID: 244900  
Board Certified Specialty: No  
477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024  
Phone: (760) 944-5545  
Fax: (760) 944-3927  
After Hours Phone: (760) 944-5545  
Provider Gender: Female  
NPI: 1952740177  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**OTOLARYNGOLOGY**

**PATEL, VIJAY**

Provider ID: 297035  
Board Certified Specialty: No  
477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024  
Phone: (760) 944-5545  
Fax: (760) 944-3927  
After Hours Phone: (760) 944-5545  
Provider Gender: Female  
NPI: 1780935650  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
### PEDIATRIC ALLERGY / IMMUNOLOGY

**GREINER, ALEXANDER**  
Provider ID: 205696  
Board Certified Specialty: No  
477 N EL CAMINO REAL STE D302  
ENCINITAS, CA 92024  
Phone: (858) 966-4900  
Fax: (760) 944-3927  
After Hours Phone: (858) 966-4900  
Provider Gender: Male  
NPI: 1609801299  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: French, German, Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Ca Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**PEDIATRIC CARDIOLOGY**  
**HALEY, JESSICA**  
Provider ID: 205688  
Board Certified Specialty: No  
477 N EL CAMINO REAL STE D302  
ENCINITAS, CA 92024  
Phone: (760) 944-5545  
Fax: (760) 944-3927  
After Hours Phone: (760) 944-5545  
Provider Gender: Female  
NPI: 1023329885  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Ca Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**PEDIATRIC CARDIOLOGY**  
**NARAYAN, HARI**  
Provider ID: 239115  
Board Certified Specialty: No  
477 N EL CAMINO REAL BLDG D STE 302  
ENCINITAS, CA 92024  
Phone: (760) 944-5545  
Fax: (760) 944-3927  
After Hours Phone: (760) 944-5545  
Provider Gender: Male  
NPI: 1417222472  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Ca Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC
GASTROENTEROLOGY
CHU, CHRISTOPHER
Provider ID: 301641
Board Certified Specialty: No
 477 N EL CAMINO REAL
 STE D302
 ENCINITAS, CA 92024
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
 Provider Gender: Male
 NPI: 1912369273
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish, Yue Chinese
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCDAVIS MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

GASTROENTEROLOGY
YOUNG, JOCELYN
Provider ID: 294676
Board Certified Specialty: No
 477 N EL CAMINO REAL
 STE D302
 ENCINITAS, CA 92024
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
 Provider Gender: Female
 NPI: 1306227491
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UC DAVIS MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY
CERNELC KOHAN, MATEJKA
Provider ID: 243043
Board Certified Specialty: No
 477 N EL CAMINO REAL
 STE 302 BLDG D
 ENCINITAS, CA 92024
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
 Provider Gender: Female
 NPI: 1144615659
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC PULMONOLOGY
LENHART-PENDERGRASS, PATRICIA
Provider ID: 294642
Board Certified Specialty: No
 477 N EL CAMINO REAL
 STE D302
 ENCINITAS, CA 92024
 Phone: (760) 944-5545
 Fax: (760) 944-3927
 After Hours Phone: (760) 944-5545
 Provider Gender: Female
 NPI: 1144615659
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
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<td><strong>DOUGHERTY, CLARA</strong></td>
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<td>320 SANTA FE DR STE 108 ENCINITAS, CA 92024</td>
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<tr>
<td>Phone: (760) 436-4558</td>
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<td>Fax: (858) 429-7926</td>
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<td><strong>HIGGINS, JOSHUA</strong></td>
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1665
D3. 專業提供者目錄

1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861624181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
PELIO, DARREN
Provider ID: 293443
Board Certified Specialty: No
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386791028
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
KIVIAT, ANNETTE
Provider ID: 302454
Board Certified Specialty: No
477 N EL CAMINO REAL
STE D302
ENCINITAS, CA 92024
Phone: (760) 944-5545
Fax: (760) 944-5545
After Hours Phone: (760) 944-5545
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL
HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
VANETSKY, GARY
Provider ID: 269152
Board Certified Specialty: No
477 N EL CAMINO REAL
STE D308
ENCINITAS, CA 92024
Phone: (760) 436-2300
Fax: (760) 436-5482
After Hours Phone: (760) 436-2300
Provider Gender: Male
NPI: 1417034489
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
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<td>CONTACT PROVIDER</td>
<td>Male</td>
<td>(760) 436-5533</td>
<td>(760) 436-0611</td>
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<td>Female</td>
<td>(800) 926-8273</td>
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<td>CONTACT PROVIDER</td>
<td>Female</td>
<td>(760) 943-8806</td>
<td>(760) 944-1309</td>
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<td>21-999</td>
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<td>CONTACT PROVIDER</td>
<td>Female</td>
<td>(760) 230-8994</td>
<td>(760) 944-1309</td>
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<td>(760) 943-8806</td>
<td>(760) 944-1309</td>
<td>(760) 943-8806</td>
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**PODIATRIST**
DUSTIN, ADAM
Provider ID: 275800
Board Certified Specialty: No
326 ENCINITAS BLVD STE 100
ENCINITAS, CA 92024
Phone: (760) 436-5533
Fax: (760) 436-0611
After Hours Phone: (760) 436-5533
Provider Gender: Male
NPI: 1043389026
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**PSYCHOLOGIST**
GOMEZ, JUANITA
Provider ID: 291423
Board Certified Specialty: No
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790915759
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**PULMONARY DISEASES**
BAUTISTA, JENNIFER
Provider ID: 297958
Board Certified Specialty: No
354 SANTA FE DR
ENCINITAS, CA 92024
Phone: (760) 943-8806
Fax: (760) 944-1309
After Hours Phone: (760) 943-8806
Provider Gender: Female
NPI: 1770727034
Provider English Spoken: Y
Provider Language(s): Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, NATIVIDAD MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 21-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**PULMONARY DISEASES**
BAUTISTA, JENNIFER
Provider ID: 300863
Board Certified Specialty: No
326 SANTA FE DR STE 100
ENCINITAS, CA 92024
Phone: (760) 230-8994
Fax: (760) 944-1309
After Hours Phone: (760) 230-8994
Provider Gender: Female
NPI: 1770727034
Provider English Spoken: Y
Provider Language(s): Tagalog
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, NATIVIDAD MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 21-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

【 JOHN SALLY THORNTON 】
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY GENERAL
JACOBSEN, GARTH
Provider ID: 201730
Board Certified Specialty: No
1200 GARDEN VIEW RD
ENCINITAS, CA 92024
Phone: (858) 657-8860
After Hours Phone: (858) 657-8860
Provider Gender: Male
NPI: 1265649966
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY GENERAL
ARMANI, AVA
Provider ID: 282143
Board Certified Specialty: No
1200 GARDEN VIEW RD
STE 200
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861759383
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MEDICAL CTR AT UCSF, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL
RHOTEN, REX LLOYD
Provider ID: 301724
Board Certified Specialty: No
477 N EL CAMINO REAL
STE C204
ENCINITAS, CA 92024
Phone: (760) 230-2256
Fax: (833) 986-0104
After Hours Phone: (760) 230-2256
Provider Gender: Male
NPI: 1083792220
Provider English Spoken: Y
D3. 專業提供者目錄

- **Provider Language(s)**
  - Spoken: Spanish
  - Cultural Competency: N

- **Hospital Affiliation**
  - CEDARS SINAI MEDICAL CENTER, ALVARADO COMMUNITY HOSPITAL

- **Medi-Cal Open Panel**: Yes
  - Min/Max Age: 0\19
  - American Sign Language (ASL): N

- **Accessibility**: CONTACT PROVIDER

- **Hours**: M-F
  - 8:00AM-5:00PM

- **Website**: N/A

**SURGERY PEDIATRIC**

**FAIRBANKS, TIMOTHY**

- Provider ID: 205497
- Board Certified Specialty: No
- 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024
- Phone: (760) 944-5545
- Fax: (760) 944-3927
- After Hours Phone: (760) 944-5545

- Provider Gender: Male
- NPI: 1407010556

- Provider English Spoken: Y
- Cultural Competency: N

**KLING, KAREN**

- Provider ID: 206128
- Board Certified Specialty: No
- 477 N EL CAMINO REAL STE D302 ENCINITAS, CA 92024
- Phone: (760) 944-5545
- Fax: (760) 944-3927
- After Hours Phone: (760) 944-5545

- Provider Gender: Female
- NPI: 1982775144

- Provider English Spoken: Y
- Cultural Competency: N

**REID, CHRISTOPHER**

- Provider ID: 238130
- Board Certified Specialty: No
- 1200 GARDEN VIEW RD ENCINITAS, CA 92024
- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273

- Provider Gender: Male
- NPI: 1982964276

- Provider English Spoken: Y
- Cultural Competency: N

**ESCONDISDO**

**ANESTHESIOLOGY PAIN MANAGEMENT**

**DAIRO, BRANDON**

- Provider ID: 299881
- Board Certified Specialty: No
- 1955 CITRACADO PKWY STE 203 ESCONDIDO, CA 92029
- Phone: (760) 738-5533
- Fax: (760) 738-3835
- After Hours Phone: (760) 738-5533

- Provider Gender: Male
- NPI: 1689092470
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<td>TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA</td>
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<td>Hospital Affiliation:</td>
<td>SHARP MEMORIAL HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER</td>
<td>Hospital Affiliation:</td>
<td>RADY CHILDRENS HOSPITAL SAN DIEGO</td>
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**ANESTHESIOLOGY PAIN MANAGEMENT**

**DAIRO, BRANDON**

Provider ID: 300090  
Board Certified Specialty: No  
1955 CITRACADO PKWY STE 203  
ESCONDIDO, CA 92029  
Phone: (760) 738-5533  
Fax: (760) 738-3835  
After Hours Phone: (760) 738-5533  
Provider Gender: Male  
NPI: 1689092470  
Provider English Spoken: Y  
Cultural Competency: N  

**ROBINSON, COLE**

Provider ID: 300171  
Board Certified Specialty: No  
160 N DATE ST  
ESCONDIDO, CA 92025  
Phone: (888) 873-6220  
Fax: (888) 873-6220  
After Hours Phone: (888) 873-6220  
Provider Gender: Male  
NPI: 1871799528  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 21\999  
American Sign Language (ASL): N

**CERTIFIED NURSE PRACTITIONER**

**HEAD, KRISTIN**

Provider ID: 277866  
Board Certified Specialty: No  
2125 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92029  
Phone: (760) 294-9260  
Fax: (760) 294-9274  
After Hours Phone: (760) 294-9260  
Provider Gender: Female  
NPI: 1699078923  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes
D3. 專業提供者目錄

Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
JANNESARI, ROYA
Provider ID: 302339
Board Certified Specialty: No
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
After Hours Phone: (760) 743-1431
Provider Gender: Male
NPI: 1063585099
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
KESHAVARZI, SARA
Provider ID: 305938
Board Certified Specialty: No
488 E VALLEY PKWY STE 108
ESCONDIDO, CA 92025
Phone: (760) 466-9800
Fax: (360) 462-2741
After Hours Phone: (760) 466-9800
Provider Gender: Female
NPI: 1457996126
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
MCCARTHY, KATHRYN
Provider ID: 298143
Board Certified Specialty: No
488 E VALLEY PKWY STE 404
ESCONDIDO, CA 92025
Phone: (760) 466-9800
Fax: (360) 462-2741
After Hours Phone: (760) 466-9800
Provider Gender: Female
NPI: 1700850781
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
SEILNACHT-BERNARD, KAREN
Provider ID: 269203
Board Certified Specialty: No
488 E VALLEY PKWY STE 108
ESCONDIDO, CA 92025
Phone: (877) 217-8505

ACCESSIBILITY: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
WALDRUP, LA'RHNODA
Provider ID: 299259
Board Certified Specialty: No
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
NPI: 1831627181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
Fax: (760) 735-6296
☑ After Hours Phone: (877) 217-8505
Provider Gender: Female
NPI: 1861562498
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 surrendered.
Hours: M-F 9:00AM-5:00PM
Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
REDDY, NAVYA
Provider ID: 302350
Board Certified Specialty: No
625 CITRACADO PKWY STE 108
ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
☑ After Hours Phone: (760) 743-1431
Provider Gender: Female
NPI: 1083069611
☑ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 surrender.
Hours: M-F 8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
GARA, NAVEEN
Provider ID: 305691
Board Certified Specialty: No
935 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Phone: (760) 690-2800
Fax: (949) 404-6908
☑ After Hours Phone: (760) 690-2800
Provider Gender: Male
NPI: 1942406533
☑ Provider English Spoken: Y
☑ Provider Language(s)
 Spoken: Hindi, Telugu
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, PALOMAR MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
GASTROENTEROLOGY
GARA, NAVEEN
Provider ID: 269145
Board Certified Specialty: No
661 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Phone: (760) 690-2800
Fax: (760) 690-2801
After Hours Phone: (760) 690-2800
Provider Gender: Male
NPI: 1942406533
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Telugu
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, PALOMAR MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
CHEN, ANDREW
Provider ID: 296830
Board Certified Specialty: No
2130 CITRACADO PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-4789
Fax: (760) 743-8005
After Hours Phone: (760) 743-4789
Provider Gender: Male
NPI: 1134357007
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

HEARING AID DEALER / SUPPLIER
ANDERSON, ELAINE
Provider ID: 268690
Board Certified Specialty: No
330 W FELICITA AVE STE A4
ESCONDIDO, CA 92025
Phone: (760) 489-1323
Fax: (760) 489-0975
After Hours Phone: (760) 489-1323
Provider Gender: Female
NPI: 1063558856
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY
BAYAT, HAMED
Provider ID: 296842
Board Certified Specialty: No
2130 CITRACADO PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 317-9769
After Hours Phone: (760) 743-0546
Provider Gender: Male
NPI: 1467455212
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERVENTIONAL CARDIOLOGY
BAYAT, HAMED
Provider ID: 296842
Board Certified Specialty: No
2130 CITRACADO PKWYSTE 220
ESCONDIDO, CA 92029
Phone: (760) 743-0546
Fax: (760) 743-8837
After Hours Phone: (760)
### INTERVENTIONAL CARDIOLOGY

#### BAYAT, HAMED

Provider ID: 296843  
Provider Gender: Male  
Provider English Spoken: Y  
Provider Language(s) Spoken: Farsi  
Cultural Competency: N  
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

#### GILBERT, CHRISTOPHER

Provider ID: 296839  
Provider Gender: Male  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS GREEN HOSPITAL, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

#### SAWHNEY, NAVINDER

Provider ID: 304784  
Provider Gender: Male  
Provider English Spoken: Y  
Provider Language(s) Spoken: Farsi, Portuguese,  
Cultural Competency: N  
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

#### SERRY, ROD

Provider ID: 304765  
Provider Gender: Male  
Provider English Spoken: Y  
Provider Language(s) Spoken: Farsi  
Cultural Competency: N  
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\150  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A
D3. 專業提供者目錄

Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL,
PALOMAR HEALTH, PALOMAR
MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

MATERNAL AND FETAL
MEDICINE
MELBER, DORA
Provider ID: 296996
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL
MEDICINE
LE, CRYSTAL
Provider ID: 283707
Board Certified Specialty: No
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-3193
Fax: (442) 281-3197
After Hours Phone: (442) 281-3193
Provider Gender: Female
NPI: 1003028416
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY
D3. 專業提供者目錄

HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM Website: N/A

NEONATAL / PERINATAL MEDICINE
SAUER, CHARLES
Provider ID: 206163 Board Certified Specialty: No

2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-2850 Fax: (442) 281-2999
After Hours Phone: (442) 281-2850

Provider Gender: Male
NPI: 1538388988
Provider English Spoken: Y Cultural Competency: N
Hospital Affiliation: RAY
CHILDRES HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL INLAND VALLEY HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM Website: N/A

NEONATAL / PERINATAL MEDICINE
SUTTNER, DENISE
Provider ID: 206137 Board Certified Specialty: No

2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-2850 Fax: (442) 281-2999
After Hours Phone: (442) 281-2850

Provider Gender: Female
NPI: 1457433799
Provider English Spoken: Y Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RAY
CHILDRES HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

Accessibility: CONTACT PROVIDER Hours: M-F

1676
D3. 專業提供者目錄

8:00AM-5:00PM  
Website: N/A

Nephrology
AL-DAHHAN, ZAID
Provider ID: 297898
Board Certified Specialty: No
631 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 294-1660
Fax: (760) 745-5016
After Hours Phone: (760) 294-1660
Provider Gender: Male
NPI: 1740716828
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Neurology
GOLD, JEFFREY
Provider ID: 277870
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1194046581
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RODY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Neurology
JINDAL, ANUJA
Provider ID: 277838
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1174870067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RODY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Neurology
ZIMBRIC, MICHAEL
Provider ID: 277891
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
Board Certified Specialty: No

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1487819546

Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSF Benioff Children's Hospital Oakland

Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL
Provider ID: 277040
Board Certified Specialty: No
1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Phone: (760) 233-1896
After Hours Phone: (760) 233-1896
Provider Gender: Male
NPI: 1215170717

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Palomar Medical Center
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9:00AM-4:30PM F 9:00AM-2:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL
Provider ID: 285628
Board Certified Specialty: No
1955 CITRACADO PKWY
STE 302
ESCONDIDO, CA 92029
Phone: (760) 233-1896
After Hours Phone: (760) 233-1896
Provider Gender: Male
NPI: 1215170717

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

HINSHAW, PAUL
Provider ID: 277041
Board Certified Specialty: No
488 E VALLEY PKWY STE 400
ESCONDIDO, CA 92025
Phone: (760) 658-6101
Fax: (760) 658-6106
After Hours Phone: (760) 658-6101
Provider Gender: Male
NPI: 1215170717

Provider English Spoken: Y
Cultural Competency: N
D3. 專業提供者目錄

Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 9:00AM-4:30PM F 9:00AM-2:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY

LAMALE-SMITH, LEAH
Provider ID: 285518
Board Certified Specialty: No
2125 CITRACADO PKWY STE 210
ESCONDIDO, CA 92029
 Phone: (760) 739-2921
 Fax: (760) 739-3162
 After Hours Phone: (760) 739-2921
Provider Gender: Female
NPI: 1396904876
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY

BHATIA, SHAGUN
Provider ID: 277877
Board Certified Specialty: No
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
 Phone: (760) 755-7600
 Fax: (760) 755-7699
 After Hours Phone: (760) 755-7600
Provider Gender: Female
NPI: 1104237353
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY
### D3. 專業提供者目錄

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<th>Provider</th>
<th>Specialty</th>
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<th>Hospital Affiliation</th>
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D3. 專業提供者目錄

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
SHEILS, CATHERINE
Provider ID: 305307
Board Certified Specialty: No
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (800) 765-2737
Fax: (619) 291-6577
After Hours Phone: (800) 765-2737
Provider Gender: Female
NPI: 1932605649
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OPTOMETRIST
AOTO, KIM
Provider ID: 277869
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Male
NPI: 1235287947
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OPTOMETRIST
AOTO, KIM
Provider ID: 305307
Board Certified Specialty: No
700 W EL NORTE PKWY
ESCONDIDO, CA 92026
Phone: (800) 765-2737
Fax: (619) 291-6577
After Hours Phone: (800) 765-2737
Provider Gender: Female
NPI: 1932605649
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-4:00PM
W-F 8:30AM-1:00PM
Website: N/A

OPTOMETRIST
AOTO, KIM
Provider ID: 296796
Board Certified Specialty: No
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Provider Gender: Female
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s): Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 9:00AM-5:00PM
TU 8:30AM-4:30PM
W 7:30AM-4:30PM
TH 9:30AM-5:00PM
F 8:30AM-4:00PM
Website: N/A
D3. 專業提供者目錄

**OTOLARYNGOLOGY**
**BLISS, MORGAN**
Provider ID: 277537
Board Certified Specialty: No
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
Provider ID: 277537
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**OTOLARYNGOLOGY**
**JIANG, WEN**
Provider ID: 277860
Board Certified Specialty: No
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
Provider ID: 277860
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**OTOLARYNGOLOGY**
**PATEL, VIJAY**
Provider ID: 297038
Board Certified Specialty: No
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Male
Provider ID: 297038
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**OTOLARYNGOLOGY**
**LEUIN, SHELBY**
Provider ID: 206110
Board Certified Specialty: No
625 CITRACADO PKWY STE 206
ESCONDIDO, CA 92025
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
Provider ID: 206110
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**OTOLARYNGOLOGY**
**FRIESEN, TZYYNONG**
Provider ID: 277853
Board Certified Specialty: No
2125 CITRACADO PKWY STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Provider Gender: Female
Provider ID: 277853
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D3. 專業提供者目錄

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

**PEDIATRIC CARDIOLOGY**

**DAVIS, CHRISTOPHER**
Provider ID: 277811
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1760691950
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

**PEDIATRIC CARDIOLOGY**

**HALEY, JESSICA**
Provider ID: 277867
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Female
NPI: 1023329885
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

**PEDIATRIC CARDIOLOGY**

**NARAYAN, HARI**
Provider ID: 277846
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1376705707
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A
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<tr>
<th>Provider ID</th>
<th>Specialty</th>
<th>Board Certified Specialty</th>
<th>Location</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Provider Gender</th>
<th>NPI</th>
<th>Provider Language(s)</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Accessibility</th>
<th>Hours</th>
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<td>PEDIATRIC CARDIOLOGY</td>
<td>No</td>
<td>2125 CITRACADO PKWY STE 100</td>
<td>ESCONDIDO, CA 92025</td>
<td>(760) 294-9260</td>
<td>(760) 294-9274</td>
<td>(760) 294-9260</td>
<td>Female</td>
<td>1295042653</td>
<td>RAY CHILDREN'S HOSPITAL SAN DIEGO</td>
<td>Yes</td>
<td>0-19</td>
<td>N</td>
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<td>M-F 8:00AM-5:00PM</td>
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<td>206298</td>
<td>PEDIATRIC CARDIOLOGY</td>
<td>No</td>
<td>625 CITRACADO PKWY STE 100</td>
<td>ESCONDIDO, CA 92025</td>
<td>(760) 294-9260</td>
<td>(760) 294-9274</td>
<td>(760) 294-9260</td>
<td>Male</td>
<td>1417222472</td>
<td>RAY CHILDREN'S HOSPITAL SAN DIEGO</td>
<td>Yes</td>
<td>0-19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
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<td>277158</td>
<td>PEDIATRIC DERMATOLOGY</td>
<td>No</td>
<td>2125 CITRACADO PKWY STE 100</td>
<td>ESCONDIDO, CA 92025</td>
<td>(760) 755-7600</td>
<td>(760) 755-7699</td>
<td>(760) 755-7600</td>
<td>Female</td>
<td>1053488981</td>
<td>KAISER FOUNDATION HOSPITAL SAN DIEGO</td>
<td>Yes</td>
<td>0-19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>SU 1:00PM-10:00PM</td>
<td>M-F 4:00PM-10:00PM</td>
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</tbody>
</table>
D3. 專業提供者目錄

**PEDIATRIC EMERGENCY MEDICINE**

**BELLOMO, THOMAS**  
Provider ID: 277865  
Board Certified Specialty: No  
 UIManager: 2125 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92029  
Phone: (760) 739-1543  
Fax: (760) 294-9274  
After Hours Phone: (760) 739-1543  
Provider Gender: Male  
NPI: 1700926698  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM  
Website: N/A

**GROSS, MATTHEW**  
Provider ID: 297178  
Board Certified Specialty: No  
.UIManager: 2125 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92029  
Phone: (760) 739-1543  
Fax: (760) 294-9274  
After Hours Phone: (760) 739-1543  
Provider Gender: Male  
NPI: 1942223664  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM  
Website: N/A

**GORHAM, LAURA**  
Provider ID: 277851  
Board Certified Specialty: No  
.UIManager: 2125 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92029  
Phone: (760) 739-1543  
Fax: (760) 294-9274  
After Hours Phone: (760) 739-1543  
Provider Gender: Female  
NPI: 1316162324  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM  
Website: N/A

**PEDIATRIC EMERGENCY MEDICINE**

**BETTY, MARYANN**  
Provider ID: 277914  
Board Certified Specialty: No  
.UIManager: 2125 CITRACADO PKWY STE 100  
ESCONDIDO, CA 92029  
Phone: (760) 739-1543  
Fax: (760) 294-9274  
After Hours Phone: (760) 739-1543  
Provider Gender: Female  
NPI: 1285014498  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM  
Website: N/A
D3. 專業提供者目錄

JOSHI, WEENA
Provider ID: 277907
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1376862177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RACY CHILDREN'S HOSPITAL SAN DIEGO, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDICATRIC EMERGENCY MEDICINE
LOVEJOY, AMY
Provider ID: 277884
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1790856557
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, CHILDREN'S HOSPITAL OF ORANGE COUNTY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

MENDES, CHANTAL
Provider ID: 295670
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1134681265
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

MINKA, GENEVIEVE
Provider ID: 277859
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1689646689
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDICATRIC EMERGENCY MEDICINE
OZAKI, YOSHIHIRO
Provider ID: 278884
Board Certified Specialty: No
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1790856557
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A
D3. 專業提供者目錄

Provider ID: 277902
Board Certified Specialty: No
.providers
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Male
NPI: 1467898239
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
QUINONES-PEREZ, BIANCA
Provider ID: 277810
Board Certified Specialty: No
.providers
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1124360565
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
TODD, SARAH
Provider ID: 302802
Board Certified Specialty: No
.providers
2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1407299787
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A
PEDIATRIC EMERGENCY
MEDICINE
VAIDYA, KAMALA
Provider ID: 205812
Board Certified Specialty: No
625 CITRACADO PKWY STE 100
ESCONDIDO, CA 92025
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady
Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY
MEDICINE
VAIDYA, KAMALA
Provider ID: 289412
Board Certified Specialty: No
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 739-1543
Fax: (760) 294-9274
After Hours Phone: (760) 739-1543
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady
Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC GASTROENTEROLOGY
CHU, CHRISTOPHER
Provider ID: 277868
Board Certified Specialty: No
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1912369273
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Yue Chinese
Cultural Competency: N
Hospital Affiliation: Rady
Children's Hospital San Diego, UCSD Medical CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

HOSPITAL ENCINITAS, Rady
Children's Hospital San Diego, Scripps Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
D3. 專業提供者目錄

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDICATRIC GASTROENTEROLOGY
PATHAK, SAGAR
Provider ID: 301826
Board Certified Specialty: No
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1700318292
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: N
Hospital Affiliation: RODY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

PHYSICAL MEDICINE / REHABILITATION
RICHARDSON, HENRY
Provider ID: 295277
Board Certified Specialty: No
1955 CITRACADO PKWY STE 203
ESCONDIDO, CA 92029
Phone: (760) 738-5533
Fax: (909) 204-7863
After Hours Phone: (760) 738-5533
Provider Gender: Male
NPI: 1407052459
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N

PHYSICIANS ASSISTANT
BEITTER, KEERSTIN
Provider ID: 300094
Board Certified Specialty: No
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-2850
Fax: (442) 281-2999
After Hours Phone: (442) 281-2850
Provider Gender: Female
NPI: 1902983752
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

PHYSICAL MEDICINE / REHABILITATION
RYAN, KYLE
Provider ID: 275660
Board Certified Specialty: No
625 CITRACADO PKWY
ESCONDIDO, CA 92025
Phone: (760) 294-9260
Fax: (760) 294-9274
After Hours Phone: (760) 294-9260
Provider Gender: Male
NPI: 1447645742
Provider English Spoken: Y
Cultural Competency: N
Min/Max Age: 0\19
American Sign Language (ASL): N
PHYSICIANS ASSISTANT

CORVINI, NICOLAS
Provider ID: 296999
Board Certified Specialty: No
Address: 425 N DATE ST, ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Provider Gender: Male
NPI: 1194242461
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

FUNARI, CHRISTOPHER
Provider ID: 301993
Board Certified Specialty: No
Address: 625 CITRACADO PKWY STE 108, ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
After Hours Phone: (760) 743-1431
Provider Gender: Male
NPI: 1982365490
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: N
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

CHATFIELD, ALEXANDRA
Provider ID: 276716
Board Certified Specialty: No
Address: 1955 CITRACADO PKWY STE 200, ESCONDIDO, CA 92029
Phone: (760) 743-4789
Fax: (858) 673-5187
After Hours Phone: (760) 743-4789
Provider Gender: Female
NPI: 1215584628
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

CUTCHON, SYDNEY
Provider ID: 302306
Board Certified Specialty: No
Address: 625 CITRACADO PKWY STE 108, ESCONDIDO, CA 92025
Phone: (760) 743-1431
Fax: (760) 743-6455
After Hours Phone: (760) 743-1431
Provider Gender: Female
NPI: 1659914240
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

**PHYSICIANS ASSISTANT**

**GANGJI, SHAZMIN**  
Provider ID: 298110  
Board Certified Specialty: No  
460 N ELM ST  
escondido, CA 92025  
Phone: (760) 520-8100  
Fax: (360) 462-2745  
After Hours Phone: (760) 520-8100  
Provider Gender: Female  
NPI: 1346763638  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 14\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**PHYSICIANS ASSISTANT**  
**MEHTA, NOOPUR**  
Provider ID: 297093  
Board Certified Specialty: No  
460 N ELM ST  
escondido, CA 92025  
Phone: (760) 520-8100  
Fax: (760) 466-1373  
After Hours Phone: (760) 520-8100  
Provider Gender: Female  
NPI: 1417682931  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**PHYSICIANS ASSISTANT**  
**MONTES, VIVIAN**  
Provider ID: 298090  
Board Certified Specialty: No  
728 E VALLEY PKWY  
escondido, CA 92025  
Phone: (760) 737-6900  
Fax: (360) 462-2741  
After Hours Phone: (760) 737-6900  
Provider Gender: Female  
NPI: 1881358026  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**PHYSICIANS ASSISTANT**  
**NIAKAMAL, EVAN**  
Provider ID: 291250  
Board Certified Specialty: No  
425 N DATE ST  
escondido, CA 92025  
Phone: (760) 520-8340  
Fax: (858) 633-4698  
After Hours Phone: (760) 520-8340  
Provider Gender: Male  
NPI: 1639796873  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**PHYSICIANS ASSISTANT**  
**CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL**  
Board Certified Specialty: No  
728 E VALLEY PKWY  
escondido, CA 92025  
Phone: (760) 737-6900  
Fax: (360) 462-2741  
After Hours Phone: (760) 737-6900  
Provider Gender: Female  
NPI: 1346763638  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 14\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A
### PROVIDER

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<tr>
<td>WALSH, JOHN</td>
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<tr>
<td>Provider ID: 301971</td>
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<tr>
<td>625 CITRACADO PKWY STE 108</td>
</tr>
<tr>
<td>ESCONDIDO, CA 92025</td>
</tr>
<tr>
<td>Phone: (760) 743-1431</td>
</tr>
<tr>
<td>Fax: (760) 743-6455</td>
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<tr>
<td>After Hours Phone: (760) 743-1431</td>
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<td>WILE, KIMBERLY</td>
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<td>ESCONDIDO, CA 92025</td>
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<td>Phone: (760) 743-1431</td>
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<td>1955 CITRACADO PKWY</td>
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<td>ESCONDIDO, CA 92029</td>
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<tr>
<td>Phone: (760) 738-5533</td>
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<td>Fax: (760) 738-3835</td>
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<tr>
<td>Phone: (760) 520-8100</td>
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<tr>
<td>Fax: (605) 466-1373</td>
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<td>After Hours Phone: (760) 520-8100</td>
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<tr>
<td>Provider Gender: Female</td>
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<tr>
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<td>Hospital Affiliation: CLOVIS COMMUNITY HOSPITAL, ST AGNES MEDICAL CENTER, MADERA COMMUNITY HOSPITAL</td>
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<td>Website: N/A</td>
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D3. 專業提供者目錄

PODIATRIST
READ, TRENTON
Provider ID: 300882
Board Certified Specialty: No
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Phone: (760) 480-1189
Fax: (858) 485-1515
After Hours Phone: (760) 480-1189
Provider Gender: Male
NPI: 1952963431
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PODIATRIST
READ, TRENTON
Provider ID: 296654
Board Certified Specialty: No
215 S HICKORY ST STE 118
ESCONDIDO, CA 92025
Phone: (760) 480-1189
Fax: (858) 485-1515
After Hours Phone: (760) 480-1189
Provider Gender: Male
NPI: 1952963431
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
ESTRADA PATINO, ANGELA
Provider ID: 296605
Board Certified Specialty: No
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (760) 466-1373
After Hours Phone: (760) 520-8100
Provider Gender: Female
NPI: 1629339015
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
SUOZZO, JOSEPH
Provider ID: 290758
Board Certified Specialty: No
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (858) 633-4698
After Hours Phone: (760) 520-8340
Provider Gender: Male
NPI: 1821013228
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
CARLTON PENN, CORNELIA
Provider ID: 290406
Board Certified Specialty: No
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Provider Gender: Female
NPI: 1891720611
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 14\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
### Cultural Competency: N
### Medi-Cal Open Panel: Yes
### Min/Max Age: 0-999
### American Sign Language (ASL): N

#### Accessibility: CONTACT PROVIDER
#### Website: N/A

#### PSYCHOLOGIST

**TEETER-WITT, ALYSSA**

- Provider ID: 290891
- Board Certified Specialty: No
- 425 N DATE ST
  - ESCONDIDO, CA 92025
- Phone: (760) 520-8300
- Fax: (858) 633-4698
- After Hours Phone: (760) 520-8300
- Provider Gender: Female
- NPI: 1932308442
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N

#### Website: N/A

#### PSYCHOLOGIST

**VALLEE-BARLAM, ANDREA**

- Provider ID: 290630
- Board Certified Specialty: No
- 426 N DATE ST
  - ESCONDIDO, CA 92025
- Phone: (760) 690-5900
- Fax: (858) 633-4693
- After Hours Phone: (760) 690-5900
- Provider Gender: Female
- NPI: 1710902143
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N

#### Website: N/A

#### PSYCHOLOGIST

**VAQUERO, JUANA**

- Provider ID: 290762
- Board Certified Specialty: No
- 425 N DATE ST
  - ESCONDIDO, CA 92025
- Phone: (760) 520-8300
- Fax: (858) 633-4698
- After Hours Phone: (760) 520-8300
- Provider Gender: Female
- NPI: 1023459708
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N

#### Website: N/A

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1694
PSYCHOLOGIST
WOODWORTH, JENNIFER
Provider ID: 290634
Board Certified Specialty: No
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (858) 633-4698
After Hours Phone: (760) 520-8340
Provider Gender: Female
Provider ID: 290634
NPI: 1639362494
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIATION ONCOLOGY
COLEMAN, LORI
Provider ID: 221090
Board Certified Specialty: No
2125 CITRACADO PKWY STE 110
ESCONDIDO, CA 92029
Phone: (760) 739-3371
Fax: (760) 739-3779
After Hours Phone: (760) 739-3371
Provider Gender: Female
NPI: 1053348920
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

RADIATION ONCOLOGY
QUAN, MICHELE
Provider ID: 287097
Board Certified Specialty: No
2125 CITRACADO PKWY STE 230
ESCONDIDO, CA 92029
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760) 489-1458
Provider Gender: Female
NPI: 1629462882
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:00PM
Website: N/A

RADIATION ONCOLOGY
VOLPP, PAUL
Provider ID: 221103
Board Certified Specialty: No
2125 CITRACADO PKWY STE 110
ESCONDIDO, CA 92029
Phone: (760) 739-3371
Fax: (760) 759-3779
After Hours Phone: (760) 739-3371
Provider Gender: Male
NPI: 1225186232
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-4:00PM
Website: N/A

RADIATION ONCOLOGY
WEINSTEIN, GEOFFREY
Provider ID: 220041
Board Certified Specialty: No
2125 CITRACADO PKWY STE 110
ESCONDIDO, CA 92029
Phone: (760) 739-3371
Fax: (760) 759-3779
After Hours Phone: (760) 739-3371
D3. 專業提供者目錄

Provider Gender: Male
NPI: 1841233947
icable Provider Name: RADIOLOGY DIAGNOSTIC
Provider ID: 283206
Board Certified Specialty: No
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
MCGEE, JACQUELINE
Provider ID: 252473
Board Certified Specialty: No
Provider Gender: Female
NPI: 1194217133
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Hospital A
Medi-Cal Open Panel: Yes
Min/Max Age: 8\999
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-6:00PM
Website: N/A

SPEECH PATHOLOGIST
AROCHO-SALGADO, MIRELIS
Provider ID: 296931
Board Certified Specialty: No
Provider Gender: Female
NPI: 1619501186
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Spanish
Cultural Competency: No
Hospital Affiliation: Hospital A
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

SPEECH PATHOLOGIST
CLARK, MELISSA
Provider ID: 296924
Board Certified Specialty: No
Provider Gender: Female
NPI: 1063660165
Provider English Spoken: Yes
Cultural Competency: No
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
VAKILIAN, SIAVOSH
Provider ID: 283206
Board Certified Specialty: No
701 E GRAND AVE STE 200
ESCONDIDO, CA 92025
Phone: (760) 839-7370
Fax: (858) 429-7938
After Hours Phone: (760) 839-7370
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Yes
Provider Language(s) Spoken: Spanish
Cultural Competency: No
Hospital Affiliation: Hospital A
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SPEECH PATHOLOGIST
CALDERON MORALES, ASTRID
Provider ID: 305583
Board Certified Specialty: No
500 LA TERRAZA BLVD STE 150
ESCONDIDO, CA 92025
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1619501186
Provider English Spoken: Yes
Provider Language(s) Spoken: Armenian, Spanish
Cultural Competency: No
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): No
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SPEECH PATHOLOGIST
AROCHO-SALGADO, MIRELIS
Provider ID: 296931
Board Certified Specialty: No
500 LA TERRAZA BLVD STE 150
ESCONDIDO, CA 92025
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
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Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Website: N/A

SPEECH PATHOLOGIST
CLARK, MELISSA
Provider ID: 296924
Board Certified Specialty: No
500 LA TERRAZA BLVD STE
D3. 專業提供者目錄

150
ESCONDIDO, CA 92025
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1760546428
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Armenian, Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

SURGERY GENERAL
CASILLAS BERUMEN, SERGIO
Provider ID: 304606
Board Certified Specialty: No
1045 E PENNSYLVANIA AVE
ESCONDIDO, CA 92025
Phone: (760) 884-4500
Fax: (619) 483-3997
After Hours Phone: (760) 884-4500
Provider Gender: Male
NPI: 1437470762
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC
EDMONDS, ERIC
Provider ID: 277831
Board Certified Specialty: No
2125 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (760) 480-8770
Fax: (760) 480-8811
After Hours Phone: (760) 300-3647

SPEECH PATHOLOGIST
MADERA RIVERA, PAULA
Provider ID: 296577
Board Certified Specialty: No
500 LA TERRAZA BLVD STE 150
ESCONDIDO, CA 92025
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1205443769
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Armenian, Farsi, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY GENERAL
GROVE, JAY
Provider ID: 245226
Board Certified Specialty: No
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (760) 300-3647
Fax: (760) 482-1316
After Hours Phone: (760) 300-3647
Provider Gender: Male
NPI: 1912971334
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

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<td>(760) 743-0546</td>
<td>(760) 317-9769</td>
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<td>(760) 743-0546</td>
<td>(858) 385-1690</td>
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D3. Professional Provider Directory

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FALLBROOK
CERTIFIED ACUPUNCTURIST
CRAFT, KEVIN
Provider ID: 290943
Board Certified Specialty: No
1309 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 690-5900
Fax: (760) 731-1063
After Hours Phone: (760) 690-5900
Provider Gender: Male
NPI: 1659745610
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
KELLEHER, BRIDGET
Provider ID: 298086
Board Certified Specialty: No
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760) 723-6200
Provider Gender: Female
NPI: 1245695006
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
STOJANOVSKA, JOVANA
Provider ID: 1699
D3. 專業提供者目錄

Provider ID: 301367
Board Certified Specialty: No
Provider ID: 301367
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4730
Fax: (760) 451-4700
After Hours Phone: (760) 451-4730
Provider Gender: Female
NPI: 1215638499
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
TAYLOR, CHRISTOPHER
Provider ID: 299407
Board Certified Specialty: No
Provider ID: 299407
321 E ALVARADO ST
FALLBROOK, CA 92028
Phone: (760) 723-6200
Fax: (760) 414-3892
After Hours Phone: (760) 723-6200
Provider Gender: Male
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED
NURSE MIDWIFE
GUIDI, CASEY
Provider ID: 296010
Board Certified Specialty: No
Provider ID: 296010
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4730
Fax: (760) 457-4700
After Hours Phone: (760) 451-4730
Provider Gender: Female
NPI: 1013349919
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CHIROPRACTOR
FARSHLER, ANTHONY
Provider ID: 290306
Board Certified Specialty: No
Provider ID: 290306
1309 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 690-5900
Fax: (760) 731-1063
After Hours Phone: (760) 690-5900
Provider Gender: Male
NPI: 1841627759
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CHIROPRACTOR
HALVORSON, PAULA
Provider ID: 298338
Board Certified Specialty: No
Provider ID: 298338
1309 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 690-5900
Fax: (760) 731-1063
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<th>FAMILY PRACTICE</th>
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<tr>
<td>Address: 1328 S MISSION RD FALLBROOK, CA 92028</td>
<td>Phone: (760) 451-4720</td>
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<tr>
<td>Address: 3853 W STETSON AVE STE 200 HEMET, CA 92545</td>
<td>Phone: (951) 225-6802</td>
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<tr>
<td>Address: 949 PALM AVE IMPERIAL BEACH, CA 91932</td>
<td>Phone: (619) 429-3733</td>
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Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1740953249
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
CUNNINGHAM, STEPHANIE
Provider ID: 301310
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1174223655
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
BORRAJERO, OBEL
Provider ID: 303242
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Provider Gender: Male
NPI: 1093280588
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
O’CONNELL, STEFANY
Provider ID: 296845
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1386378479
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
POPE, KATILYNN
Provider ID: 305980
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1174232748
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
THYGERSEN, ALAYSA

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D3. 專業提供者目錄

Provider ID: 297909
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
📞 Phone: (619) 429-3733
Fax: (619) 628-5550
.jasper>
After Hours Phone: (619) 429-3733
/provider
NPI: 1760107767
.jasper>
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
SUMMERS-DAY, COURTNEY
Provider ID: 290977
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
📞 Phone: (619) 429-3733
Fax: (619) 628-5550
.jasper>
After Hours Phone: (619) 429-3733
/provider
NPI: 1124288873
.jasper>
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
BROWNING, ELIZABETH
Provider ID: 298122
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
📞 Phone: (619) 429-3733
Fax: (619) 628-5550
.jasper>
After Hours Phone: (619) 429-3733
/provider
NPI: 1821431057
.jasper>
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

INTERNAL MEDICINE
RYAN, DANA
Provider ID: 298099
Board Certified Specialty: No
949 PALM AVE
IMPERIAL BEACH, CA 91932
📞 Phone: (619) 429-3733
Fax: (619) 628-5550
.jasper>
After Hours Phone: (619) 429-3733
/provider
NPI: 1780609990
.jasper>
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-8:00PM
TU-W 8:30AM-5:00PM
TH 8:30AM-8:00PM
F 8:30AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
CHENG, BRANDON
Provider ID: 304530
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
📞 Phone: (619) 332-4200
Fax: (613) 332-4220
.jasper>
After Hours Phone: (619) 332-4200
/provider
NPI: 1336894724
.jasper>
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
7:00AM-7:00PM
F 7:00AM-5:00PM
SA 8:00AM-1:00PM
Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

REGISTERED PHYSICAL THERAPIST
JIMENEZ, ANDREA
Provider ID: 299890
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1407440670
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
JIMENEZ, ANDREA
Provider ID: 301973
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1407440670
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
KARANDE, PRACHI
Provider ID: 287101
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 482-3001
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1699357525
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
NGUYEN, TIA
Provider ID: 287101
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1699357525
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
7:00AM-7:00PM
F 7:00AM-4:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
NGUYEN, TIA
Provider ID: 305015
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1457136269
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

REGISTERED PHYSICAL THERAPIST
NOVENCIDO, ANDREW
Provider ID: 286783
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
SPARKS, TODD
Provider ID: 301109
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1265481139
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
NOVENCIDO, ANDREW
Provider ID: 301995
Board Certified Specialty: No
600 PALM AVE STE 126
IMPERIAL BEACH, CA 91932
Phone: (619) 482-3000
Fax: (619) 332-4220
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1083353650
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A
D3. 專業提供者目錄

Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 7:00AM-7:00PM  
Website: N/A

REGISTERED PHYSICAL THERAPIST
VILLANUEVA, GIOVANNI  
Provider ID: 301531  
Board Certified Specialty: No  
600 PALM AVE STE 126  
IMPERIAL BEACH, CA 91932  
Phone: (619) 482-3000  
Fax: (619) 332-4220  
After Hours Phone: (619) 482-3000  
Provider Gender: Male  
NPI: 1063046878  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

ANESTHESIOLOGY
BECERRA SONGOLO, TOSHA  
Provider ID: 300067  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1265938724  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

ANESTHESIOLOGY
BRUNO, KELLY  
Provider ID: 238904  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1891130993  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

ANESTHESIOLOGY
CURRAN, BRIAN  
Provider ID: 239003  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1710373642  
Provider English Spoken: Y  
Cultural Competency: N

LA JOLLA
ANESTHESIOLOGY
ALEXANDER, BRENTON  
Provider ID: 242302  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1811366644  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

ANESTHESIOLOGY
ALEXANDER, BRENTON  
Provider ID: 242302  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1811366644  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

ANESTHESIOLOGY
ALEXANDER, BRENTON  
Provider ID: 242302  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1811366644  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

ANESTHESIOLOGY
ALEXANDER, BRENTON  
Provider ID: 242302  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1811366644  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

ANESTHESIOLOGY
ALEXANDER, BRENTON  
Provider ID: 242302  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1811366644  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

ANESTHESIOLOGY
ALEXANDER, BRENTON  
Provider ID: 242302  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1811366644  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0/999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

1706
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
FEJLEH, ASHLEY
Provider ID: 269503
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609353465
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
HOSALKAR, HETAL
Provider ID: 243370
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861556821
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Gujarati, Hindi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
FUNDINGSLAND, BRENT
Provider ID: 280469
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831166560
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
HYLTON, DIANA
Provider ID: 241736
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932527751
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
FEJLEH, ASHLEY
Provider ID: 269503
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609353465
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
HOSALKAR, HETAL
Provider ID: 243370
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861556821
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Gujarati, Hindi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
FUNDINGSLAND, BRENT
Provider ID: 280469
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831166560
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
HYLTON, DIANA
Provider ID: 241736
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932527751
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
FEJLEH, ASHLEY
Provider ID: 269503
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609353465
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
HOSALKAR, HETAL
Provider ID: 243370
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861556821
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Farsi, Gujarati, Hindi
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
FUNDINGSLAND, BRENT
Provider ID: 280469
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831166560
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A
D3. 專業提供者目錄

<table>
<thead>
<tr>
<th>Provider</th>
<th>ID</th>
<th>Specialty</th>
<th>Affiliation</th>
<th>Min/Max Age</th>
<th>Language(s)</th>
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<tbody>
<tr>
<td>MEYER, MEGAN</td>
<td>239608</td>
<td>No</td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
<td>0\999</td>
<td>Vietnamese</td>
<td>Phone: (800) 926-8273</td>
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<tr>
<td>NGUYEN, QUOC SY</td>
<td>242189</td>
<td>No</td>
<td>SCRIPPS MERCY HOSPITAL, ALVARADO HOSPITAL LLC, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL</td>
<td>0\999</td>
<td>Vietnamese</td>
<td>Phone: (800) 926-8273</td>
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<td>OKAMOTO, VINCENT</td>
<td>245952</td>
<td>No</td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
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<td>SHAW, SUSANNA</td>
<td>255317</td>
<td>No</td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
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<td>Vietnamese</td>
<td>Phone: (800) 926-8273</td>
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<tr>
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<td>M-F 8:00AM-5:00PM</td>
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**ANESTHESIOLOGY**

**SUYDAM, STEVEN**
Provider ID: 286570
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386856821
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, RAYDY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL

**ANESTHESIOLOGY**

**TRIVEDI, SURAJ**
Provider ID: 2493295
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699057885
Provider English Spoken: Y
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

**ANESTHESIOLOGY**

**TSUDA, PAIGE**
Provider ID: 271683
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
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<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Provider Gender</th>
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<td>245669</td>
<td>No</td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>Male</td>
<td>1659802965</td>
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<td>284578</td>
<td>No</td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>Male</td>
<td>284578</td>
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<td>286139</td>
<td>No</td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>Female</td>
<td>286139</td>
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</table>

**ANESTHESIOLOGY**

**TULLY, JEFFREY**
Provider ID: 283690
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871912493
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**ANESTHESIOLOGY**

**TZENG, ERIC**
Provider ID: 284578
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1801258264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**ANESTHESIOLOGY**

**WANG, MICHELLE**
Provider ID: 286139
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1629463104
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

**ANESTHESIOLOGY**

YOUNAN, LAWRENCE
Provider ID: 240871
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1922432475

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**CARDIOVASCULAR DISEASE**

KEEN, WILLIAM
Provider ID: 291303
Board Certified Specialty: No
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Male
NPI: 1962561571

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**CARDIOVASCULAR DISEASE**

MIZZELL, ANNA
Provider ID: 214021
Board Certified Specialty: No
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851561021

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CARDIOVASCULAR DISEASE
SHAPIRO, HILARY
Provider ID: 300000
Board Certified Specialty: No
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811382815
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST
ARELLANO, JACQUELINE
Provider ID: 304141
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104129485
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST
ARELLANO, JACQUELINE
Provider ID: 304140
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104129485
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Provider Language(s) Spoken: Tagalog
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST
JULIAN, FIDES
Provider ID: 304135
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Provider Language(s) Spoken: Tagalog
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED ACUPUNCTURIST
JULIAN, FIDES
Provider ID: 304134
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104129485
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Website: N/A
D3. 專業提供者目錄

Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
Provider English Spoken: Y
Provider Language(s): Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Certified Nurse Practitioner
AGYEMANG, ALBERTA
Provider ID: 265131
Board Certified Specialty: No
9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1023400082
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Certified Acupuncturist
JULIAN, FIDES
Provider ID: 304130
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407401128
Provider English Spoken: Y
Provider Language(s): Tagalog
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Certified Nurse Practitioner
AGYEMANG, ALBERTA
Provider ID: 265130
Board Certified Specialty: No
9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1023400082
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Certified Nurse Practitioner
BOUTELLE, AMY
Provider ID: 243485
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609117704
Provider English Spoken: Y
Cultural Competency: N
D3. 專業提供者目錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
BRADY, KATELYN
Provider ID: 209017
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1952797540
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
BUENROSTRO, CHRISTINA
Provider ID: 243717
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851749253
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
CAPOZZI, JENNIFER
Provider ID: 241030
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336258276
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
CONNER, PAMELA
Provider ID: 299932
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1770558967
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
CONNER, PAMELA
Provider ID: 299931
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1770558967
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

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Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS GREEN HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
☎️ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER  
CZYPULL, MONICA  
Provider ID: 284662  
Board Certified Specialty: No  
9850 GENESEE AVE STE 320  
LA JOLLA, CA 92037  
☎️ Phone: (858) 554-1212  
Fax: (858) 795-1195  
☎️ After Hours Phone: (858) 554-1212  
Provider Gender: Female  
NPI: 1831784842  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
☎️ Accessibility: CONTACT PROVIDER  
⏰ Hours: M-F 8:00AM-5:00PM  
🌐 Website: N/A

CERTIFIED NURSE PRACTITIONER  
DAVIES, SUMMER  
Provider ID: 238922  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎️ Phone: (858) 657-7600  
☎️ After Hours Phone: (858) 657-7600  
Provider Gender: Female  
NPI: 1679850671  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
☎️ Accessibility: CONTACT PROVIDER  
⏰ Hours: M-F 8:00AM-5:00PM  
🌐 Website: N/A
D3. 專業提供者目錄

CERTIFIED NURSE PRACTITIONER

DE DIOS, SARAH
Provider ID: 300052
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528632742
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER

DIMAIRA, FRANCESCA
Provider ID: 245579
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (858) 228-1731
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396085098
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER

DIMAIRA, FRANCESCA
Provider ID: 245580
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346670718
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
NPI: 1689232977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
GIOVANNETTI, ERIN
Provider ID: 276002
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013317767
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
GOMEZ, LESLIE
Provider ID: 299464
Board Certified Specialty: No
9400 CAMPUS POINT DR LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528578713
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
GOMEZ, LESLIE
Provider ID: 299465
Board Certified Specialty: No
9350 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528578713
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
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<th>Provider ID</th>
<th>Provider Name</th>
<th>Specialty</th>
<th>Gender</th>
<th>NPI</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Accessibility</th>
<th>Website</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Cultural Competency</th>
<th>Medi-Cal Open Panel</th>
<th>Hours</th>
<th>Website</th>
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<tr>
<td>299469</td>
<td>Gomez, Leslie</td>
<td>No</td>
<td>Female</td>
<td></td>
<td>(800) 926-8273</td>
<td></td>
<td></td>
<td>CONTACT</td>
<td>N/A</td>
<td>0-999</td>
<td>No</td>
<td>N</td>
<td>Yes</td>
<td>F-M</td>
<td>N/A</td>
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<tr>
<td>299469</td>
<td>Gomez, Leslie</td>
<td>No</td>
<td>Female</td>
<td></td>
<td>(800) 926-8273</td>
<td></td>
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<td>CONTACT</td>
<td>N/A</td>
<td>0-999</td>
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<td>F-M</td>
<td>N/A</td>
</tr>
<tr>
<td>284967</td>
<td>Hanna, Lindsay</td>
<td>No</td>
<td>Female</td>
<td></td>
<td>(800) 926-8273</td>
<td></td>
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<td>CONTACT</td>
<td>N/A</td>
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<td>F-M</td>
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<tr>
<td>208840</td>
<td>Iyer, Victoria</td>
<td>No</td>
<td>Female</td>
<td></td>
<td>(800) 926-8273</td>
<td></td>
<td></td>
<td>CONTACT</td>
<td>N/A</td>
<td>0-999</td>
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<td>F-M</td>
<td>N/A</td>
</tr>
</tbody>
</table>
D3.  專業提供者目錄

CERTIFIED NURSE PRACTITIONER
JONES, CHRISTA
Provider ID: 275564
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (800) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093895047
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
KORMANIK, PATRICIA
Provider ID: 282070
Board Certified Specialty: No
3855 HEALTH SCIENCES DR LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396371431
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
LANE, KIMBERLY
Provider ID: 301604
Board Certified Specialty: No
9850 GENESEE AVE STE 440 LA JOLLA, CA 92037
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
LEE, HEE
Provider ID: 274644
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497275705
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
MATTHESS, JANETTE
Provider ID: 287645
Board Certified Specialty: No
9415 CAMPUS POINT DR LA JOLLA, CA 92093

<table>
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<th>Name</th>
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<th>NPI</th>
<th>Min/Max Age</th>
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<td>JOHN SALLY THORNTON</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
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<td>Female</td>
<td>1457694549</td>
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<td>CERTIFIED NURSE PRACTITIONER</td>
<td>MICK, SHARON</td>
<td>9400 CAMPUS POINT DR</td>
<td>(800) 926-8273</td>
<td>Female</td>
<td>1891061966</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
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<td>MATTHESS, JANETTE</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>Female</td>
<td>1457694549</td>
<td>Min/Max Age: 0\999</td>
<td>American Sign Language (ASL): N</td>
<td>CONTACT PROVIDER</td>
<td>8910 VILLA LA JOLLA DR STE 100</td>
<td>Yes</td>
<td>N/A</td>
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<td>9350 CAMPUS POINT DR</td>
<td>(800) 926-8273</td>
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<td>Female</td>
<td>1891061966</td>
<td>Min/Max Age: 0\999</td>
<td>American Sign Language (ASL): N</td>
<td>CONTACT PROVIDER</td>
<td>9300 CAMPUS POINT DR LA JOLLA, CA 92037</td>
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<td>MICK, SHARON</td>
<td>9300 CAMPUS POINT DR</td>
<td>(800) 926-8273</td>
<td>(800) 926-8273</td>
<td>Female</td>
<td>1891061966</td>
<td>Min/Max Age: 0\999</td>
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<td>Provider ID</td>
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<td>299650</td>
<td>MICK, SHARON</td>
<td>No</td>
<td>UCSD Medical CTR</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
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<td>291420</td>
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<td>No</td>
<td>UCSD Medical CTR</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT</td>
<td>(800) 926-8372</td>
<td>(888) 539-8781</td>
<td>(800) 926-8372</td>
<td>N</td>
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<tr>
<td>282231</td>
<td>MOHEBBI, ATHENA</td>
<td>No</td>
<td>UCSD Medical CTR</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT</td>
<td>(619) 543-3000</td>
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<td>(619) 543-3000</td>
<td>N</td>
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D3. 專業提供者目錄

NPI: 1518363407
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
ROCHE, CHELSEA
Provider ID: 270706
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1063040384
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
ROSSI, CATHERINE
Provider ID: 291446
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Female
NPI: 1265487326
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

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CERTIFIED NURSE PRACTITIONER

STEVENSON, REHEIA
Provider ID: 210795
Board Certified Specialty: No
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346696044
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

TOPPEN, LAURA
Provider ID: 215476
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1326563495
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

TRUJILLO, DALE
Provider ID: 278428
Board Certified Specialty: No
9350 CAMPUS POINT DR STE 2B
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1003104423
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

YEO, ALEXANDRIA
Provider ID: 299942
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1902368319
Provider English Spoken: Y
D3. 專業提供者目錄

- **Cultural Competency:** N
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Website:** N/A

**CERTIFIED REGISTERED NURSE ANESTHETIST**

**ALFONSO, ALVIN**  
Provider ID: 256375  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1952653404

**BAYLIS, CHRISTOPHER**  
Provider ID: 240764  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1174893358

**AMADOR, LINDSAY**  
Provider ID: 291387  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1568980472

**APPLEGET, JOSEPH**  
Provider ID: 239603  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1568980472

**BURROWS, TERENCE**  
Provider ID: 256695  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1023194560
FERRITER, STACY
Provider ID: 265296
Board Certified Specialty: No
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

GONZALEZ, LISA
Provider ID: 299906
Board Certified Specialty: No
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

LA JOLLA, CA 92037

Provider: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194134114
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
SACKS, BRENT
Provider ID: 278004
Board Certified Specialty: No
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982133591
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE
GOODWIN, RACHEL
Provider ID: 210017
Board Certified Specialty: No
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518274919
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
Certified Registered Nurse Midwife
Website: N/A

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如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

American Sign Language (ASL): ☰ After Hours Phone: (858) 657-8745
Provider Gender: Female
NPI: 1285667741
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): ☰ After Hours Phone: (858) 657-8745
Provider Gender: Female
NPI: 1285667741
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

Certified Registered Nurse Midwife
Grear Mann, Melissa
Provider ID: 210051
Board Certified Specialty: No
8910 Villa La Jolla Dr STE 200
La Jolla, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255384475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

Certified Registered Nurse Midwife
Guenther, Hope
Provider ID: 210040
Board Certified Specialty: No
8910 Villa La Jolla Dr STE 200
La Jolla, CA 92037
Phone: (858) 657-8745
After Hours Phone: (858) 657-8745
Provider Gender: Female
NPI: 1285667741
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

Certified Registered Nurse Midwife
Hirsch, Jennifer
Provider ID: 210056
Board Certified Specialty: No
9300 Campus Point Dr
La Jolla, CA 92037
Phone: (858) 657-8745
After Hours Phone: (858) 657-8745
Provider Gender: Female
NPI: 1891752069
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

Certified Registered Nurse Midwife
Nathan, Carly
Provider ID: 301046
Board Certified Specialty: No
9300 Campus Point Dr
La Jolla, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

**CERTIFIED REGISTERED NURSE MIDWIFE**

**PERDION, KAREN**

Provider ID: 210136
Board Certified Specialty: No

- 9350 CAMPUS POINT DR
  - LA JOLLA, CA 92037
  - Phone: (800) 926-8273
  - After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1518916857

- Provider English Spoken: Y
- Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

**CERTIFIED REGISTERED NURSE MIDWIFE**

**PERDION, KAREN**

Provider ID: 210135
Board Certified Specialty: No

- 8910 VILLA LA JOLLA DR
  - STE 200
  - LA JOLLA, CA 92037
  - Phone: (858) 657-8745
  - After Hours Phone: (858) 657-8745

Provider Gender: Female
NPI: 1518916857

- Provider English Spoken: Y
- Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

**EMERGENCY MEDICINE**

**AMANN, CHRISTOPHER**

Provider ID: 270914
Board Certified Specialty: No

- 9300 CAMPUS POINT DR
  - LA JOLLA, CA 92037
  - Phone: (800) 926-8273
  - After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1134326895

- Provider English Spoken: Y
- Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL, Los Angeles General Medical Center, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**EMERGENCY MEDICINE**

**AUSTIN, ANDREA**

Provider ID: 269292
Board Certified Specialty: No

- 9300 CAMPUS POINT DR
  - LA JOLLA, CA 92037
  - Phone: (800) 926-8273
  - Fax: (888) 539-8781
  - After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1811289093

- Provider English Spoken: Y
- Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL, Los Angeles General Medical Center, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
D3. Professional Provider Directory

EMERGENCY MEDICINE
BAGBY, JESSICA
Provider ID: 271138
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093161473
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
BELLINGHAUSEN, AMY
Provider ID: 270335
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801206354
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
BLACK, NICHOLAS
Provider ID: 284415
Board Certified Specialty: No
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (858) 249-6800
Fax: (858) 404-9226
After Hours Phone: (858) 249-6800
Provider Gender: Female
NPI: 1093161473
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
BARRY, JEFFREY
Provider ID: 271131
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1801207006
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
BAGBY, JESSICA
Provider ID: 271135
Board Certified Specialty: No
8910 VILLA LA JOLLA DR STE 100
LA JOLLA, CA 92037
Phone: (858) 249-6800
Fax: (858) 404-9226
After Hours Phone: (858) 249-6800
Provider Gender: Female
NPI: 1801206354
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
### EMERGENCY MEDICINE

**CASTELLANO, TIFFANY**

Provider ID: 271611

Board Certified Specialty: No

- 8910 VILLA LA JOLLA DR STE 100
  LA JOLLA, CA 92037
- Phone: (858) 249-6800
  Fax: (858) 404-9226
- After Hours Phone: (858) 249-6800

Provider Gender: Female

NPI: 1063893063

- Provider English Spoken: Y
- Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-8:00PM

Website: N/A

**GALUST, HENRIK**

Provider ID: 300053

Board Certified Specialty: No

- 8910 VILLA LA JOLLA DR
  STE 100
  LA JOLLA, CA 92037
- Phone: (800) 926-8273
  Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932696093

- Provider English Spoken: Y
- Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**CHEN, ALICE**

Provider ID: 287427

Board Certified Specialty: No

- 8910 VILLA LA JOLLA DR STE 100
  LA JOLLA, CA 92037
- Phone: (800) 926-8273
  Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427476597

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**CHEN, ALICE**

Provider ID: 287429

Board Certified Specialty: No

- 8910 VILLA LA JOLLA DR
  STE 100
  LA JOLLA, CA 92037
- Phone: (800) 926-8273
  Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427476597

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**CHEN, ALICE**

Provider ID: 300053

Board Certified Specialty: No

- 8910 VILLA LA JOLLA DR
  STE 100
  LA JOLLA, CA 92037
- Phone: (800) 926-8273
  Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932696093

- Provider English Spoken: Y
- Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**CHEN, ALICE**

Provider ID: 287429

Board Certified Specialty: No

- 8910 VILLA LA JOLLA DR
  STE 100
  LA JOLLA, CA 92037
- Phone: (800) 926-8273
  Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427476597

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**CHEN, ALICE**

Provider ID: 287427

Board Certified Specialty: No

- 8910 VILLA LA JOLLA DR STE 100
  LA JOLLA, CA 92037
- Phone: (800) 926-8273
  Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427476597

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A

**CHEN, ALICE**

Provider ID: 287427

Board Certified Specialty: No

- 8910 VILLA LA JOLLA DR STE 100
  LA JOLLA, CA 92037
- Phone: (800) 926-8273
  Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1427476597

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F

8:00AM-5:00PM

Website: N/A
### D3. 專業提供者目錄

<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>NPI</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Contact Information</th>
</tr>
</thead>
</table>
| Goodrich, Andrew          | 271625      | No                        | 1770979890        | EL CENTRO REGIONAL MEDICAL CENTER               | Yes                | Phone: (800) 926-8273
                               |             |                           |                   |                                                 |                    | Fax: (888) 539-8781                                                                  |
| Guittard, Jesse           | 239880      | No                        | 1770979890        | UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR | Yes                | Phone: (800) 926-8273
                               |             |                           |                   |                                                 |                    | Fax: (888) 539-8781                                                                  |
| Hernandez, Cristina       | 242545      | No                        | 1164765046        | UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR | Yes                | Phone: (800) 926-8273
                               |             |                           |                   |                                                 |                    | Fax: (888) 539-8781                                                                  |
| Hogue, Brenna             | 301710      | No                        | 1164765046        | UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR | Yes                | Phone: (800) 926-8273
                               |             |                           |                   |                                                 |                    | Fax: (888) 539-8781                                                                  |

- **Accessibility**: CONTACT PROVIDER
- **Website**: N/A
- **Hours**: M-F 8:00AM-5:00PM

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

**Provider English Spoken**: Y

**Provider Language(s)**: Spanish

**Cultural Competency**: N
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043705296
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE
HORNBEAK, KIRSTEN
Provider ID: 240023
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205214442
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
HOGUE, BRENNA
Provider ID: 300006
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043705296
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE
KRESHAK, ALLYSON
Provider ID: 257564
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194758219
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
KUTZ, CRAIG
Provider ID: 283844
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598295925
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
### EMERGENCY MEDICINE

#### KUTZ, CRAIG
- **Provider ID:** 283846
- **Board Certified Specialty:** No
- **Provider ID:** 283846
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A
- **9300 CAMPUS POINT DR LA JOLLA, CA 92037
- **Phone:** (800) 926-8273
- **Fax:** (888) 539-8781
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Male
- **NPI:** 1598295925
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A

#### LI, JINGHONG
- **Provider ID:** 255937
- **Board Certified Specialty:** No
- **Provider ID:** 255937
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A
- **9434 MEDICAL CENTER DR FL 1 LA JOLLA, CA 92037
- **Phone:** (858) 657-7125
- **Fax:** (858) 657-7107
- **After Hours Phone:** (858) 657-7125
- **Provider Gender:** Female
- **NPI:** 1619014479
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A

#### LIOTTA, BENJAMIN
- **Provider ID:** 283150
- **Board Certified Specialty:** No
- **Provider ID:** 283150
- **Hours:** M-F 8:00AM-8:00PM
- **Website:** N/A
- **9300 CAMPUS POINT DR LA JOLLA, CA 92037
- **Phone:** (800) 926-8273
- **Fax:** (888) 539-8781
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Male
- **NPI:** 1396270278
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Chinese
- **Cultural Competency:** N
- **Hospital Affiliation:** SHARP CHULA VISTA MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-8:00PM
- **Website:** N/A

#### MCDANIEL, MICHELE
- **Provider ID:** 246900
- **Board Certified Specialty:** No
- **Provider ID:** 246900
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A
- **9300 CAMPUS POINT DR LA JOLLA, CA 92037
- **Phone:** (800) 926-8273
- **Fax:** (888) 539-8781
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Male
- **NPI:** 1619014479
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A
D3. 专业提供者目录

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366761959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL,
SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL,
SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL,
RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
MUELLER, MATTHEW
Provider ID: 280660
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1003355629
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCSD LA JOLLA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
Website: N/A

EMERGENCY MEDICINE
NOSTE, ERIN
Provider ID: 239796
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (858) 249-6800
After Hours Phone: (858) 249-6800
Provider Gender: Female
NPI: 1871732214
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
PARK, JAY
Provider ID: 285608
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1366478372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
Website: N/A
EMERGENCY MEDICINE
QUENZER, FAITH
Provider ID: 243284
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 100
LA JO LLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295112670
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA
IRVINE MED CTR, UNIVERSITY HSP OF SAN DIEGO CO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
RUDOLF, FRANCES
Provider ID: 240160
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JO LLA, CA 92037
Phone: (858) 657-7000
After Hours Phone: (858) 657-7000
Provider Gender: Male
NPI: 1821487430
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
Website: N/A

EMERGENCY MEDICINE
SABHA, MAHMOUD
Provider ID: 240450
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 100
LA JO LLA, CA 92037
Phone: (858) 249-6800
After Hours Phone: (858) 249-6800
Provider Gender: Female
NPI: 1457747883
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
Website: N/A
D3. 專業提供者目錄

Provider ID: 283135
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1447791843
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE
SUPAT, BENJAMIN
Provider ID: 299907
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1376772905
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE
SMITH, CASEY
Provider ID: 300008
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871099333
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

EMERGENCY MEDICINE
WINKLER, GARRET
Provider ID: 271416
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1336502095
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE
YOU, ALAN
Provider ID: 269938
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1336502095
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

**EMERGENCY MEDICINE**

**YOU, ALAN**
Provider ID: 269937
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225425697
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**EMERGENCY MEDICINE**

**YU, ELAINE**
Provider ID: 299985
Board Certified Specialty: Yes
8910 VILLA LA JOLLA DR
STE A
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528564150
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**ENDOCRINOLOGY**

**GUERIN, CHRIS**
Provider ID: 284645
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1275648875
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN

**ENDOCRINOLOGY**

**METABOLISM DIABETES**

**BOEDER, SCHAER**
Provider ID: 255612
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1477808285
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
JUANG, PATRICIA
Provider ID: 255606
Board Certified Specialty: No
  9350 CAMPUS POINT DR LA JOLLA, CA 92037
  Phone: (800) 926-8273
 Fax: (888) 539-8781
 ☑ After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1265695795
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Mandarin
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

KULASA, KRISTEN
Provider ID: 255623
Board Certified Specialty: No
  9350 CAMPUS POINT DR LA JOLLA, CA 92037
  Phone: (800) 962-8273
 Fax: (888) 539-8781
 ☑ After Hours Phone: (800) 962-8273
 Provider Gender: Female
 NPI: 1932324175
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NAGELBERG, JODI
Provider ID: 287778
Board Certified Specialty: No
  8939 VILLA LA JOLLA DR LA JOLLA, CA 92037
  Phone: (800) 926-8273
 Fax: (888) 539-8781
 ☑ After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PETTUS, JEREMY
Provider ID: 303286
Board Certified Specialty: No
  9350 CAMPUS POINT DR LA JOLLA, CA 92037
  Phone: (800) 926-8273
 Fax: (888) 539-8781
 ☑ After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1225234982
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SANTOS CAVAIOLA, TRICIA
Provider ID: 256092
Board Certified Specialty: No
  9350 CAMPUS POINT DR LA JOLLA, CA 92037
  Phone: (800) 926-8273
 Fax: (888) 539-8781
 ☑ After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
NAGELBERG, JODI
Provider ID: 255602
Board Certified Specialty: No
  8939 VILLA LA JOLLA DR LA JOLLA, CA 92037
  Phone: (800) 926-8273
 Fax: (888) 539-8781
 ☑ After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
SANTOS CAVAIOLA, TRICIA
Provider ID: 256092
Board Certified Specialty: No
  9350 CAMPUS POINT DR LA JOLLA, CA 92037

1738
D3. 專業提供者目錄

FAMILY PRACTICE
CHEN, ALICE
Provider ID: 207165
Board Certified Specialty: No
Provider Gender: Female
NPI: 1265810337
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
ANAND, GOBIND
Provider ID: 272836
Board Certified Specialty: No
Provider Gender: Male
NPI: 1861626814
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

Provider ID: 270448
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 925-8273
Fax: (888) 539-8781
After Hours Phone: (800) 925-8273
Provider Gender: Male
NPI: 1588081814
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
FEJLEH, MOHAMMAD
Provider ID: 271043
Board Certified Specialty: No
9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205240959
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
DAVE, SHRAVAN
Provider ID: 270449
Board Certified Specialty: No
9300 CAMPUS POINT DR
STE 2C
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1588081814
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GASTROENTEROLOGY
FEJLEH, MOHAMMAD
Provider ID: 271042
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1780047597
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
HASAN, AWS
Provider ID: 299952
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1780047597
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

GASTROENTEROLOGY
HOLMER, ARIELA
Provider ID: 273216
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1073803243
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
SHAH, SHAILJA
Provider ID: 283897
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1073803243
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
SHAH, SHAILJA
Provider ID: 283898
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1073803243
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
TSAI, MATTHEW
Provider ID: 252368
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285051177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
TSAI, MATTHEW
Provider ID: 252368
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285051177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
TSAI, MATTHEW
Provider ID: 252368
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285051177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

GASTROENTEROLOGY
TSAI, MATTHEW
Provider ID: 252369
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285051177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

GASTROENTEROLOGY
YOUSSEF, FADY
Provider ID: 300025
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1265887723
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

HEMATOLOGY / ONCOLOGY
CHEN, YU-WEI
Provider ID: 303057
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1245694801
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

HEMATOLOGY / ONCOLOGY
ASIMAKOPOULOS, FOTIOS
Provider ID: 246594
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 822-6100
After Hours Phone: (858) 822-6100
Provider Gender: Male
NPI: 1265887723
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

HEMATOLOGY / ONCOLOGY
CHEN, YU-WEI
Provider ID: 303058
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1518134923
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1245694801
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

HEMATOLOGY / ONCOLOGY
HEYMAN, BENJAMIN
Provider ID: 202662
Board Certified Specialty: No
3960 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982995809
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

HEDAMAN, AYAD
Provider ID: 241429
Board Certified Specialty: No
3960 HEALTH SCIENCES DRIVE
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1144431230
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, French
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU-SA 8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY
HEYMAN, BENJAMIN
Provider ID: 202663
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982995809
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
Website: N/A
D3. 專業提供者目錄

HEMATOLOGY / ONCOLOGY

**PARK, SOO**
Provider ID: 257202
Board Certified Specialty: No

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1821351198
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**VU, PETER**
Provider ID: 272717
Board Certified Specialty: No

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861810830
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

**STEWART, TYLER**
Provider ID: 243920
Board Certified Specialty: No

9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699110676
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

HEMATOLOGY / ONCOLOGY

**RICHARDSON, ANGELIQUE**
Provider ID: 215010
Board Certified Specialty: No

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700120102
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**RUBENZIK, TAMARA**
Provider ID: 245574
Board Certified Specialty: No

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861810830
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**HOSPICE AND PALLIATIVE MEDICINE**

**RUBENZIK, TAMARA**
Provider ID: 245574
Board Certified Specialty: No

3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
D3. 專業提供者目錄

926-8273
Provider Gender: Female
NPI: 1811200652
.provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INFECTION DISEASE
KUPPALLI, KRUTIKA
Provider ID: 301059
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538346317
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, Stanford Health Care, STANFORD HEALTH CARE TRI-VALLEY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INFECTION DISEASE
RAMIREZ SANCHEZ, CLAUDIA
Provider ID: 299947
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1659720555
Provider English Spoken: Y
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INFECTION DISEASE
TANG, MICHAEL
Provider ID: 300063
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982018545
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERNAL MEDICINE
BORDIN-WOSK, TALYA
Provider ID: 273985
D3. Professional Providers Directory

Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801184973
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
CHENG, GEORGE
Provider ID: 247640
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1316174568
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
BORDIN-WOSK, TALYA
Provider ID: 273984
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (760) 471-9186
Fax: (619) 543-8255
After Hours Phone: (760) 471-9186
Provider Gender: Female
NPI: 1801184973
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
GELBERG, ANNA
Provider ID: 285639
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104004258
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER, HOAG MEMORIAL
HOSPITAL PRESBYTERIAN, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE
HOGARTH, MICHAEL
Provider ID: 214385
Board Certified Specialty: No
 persevering
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1225019193
 Provider English Spoken: Y
 Provider Language(s) Spoken: Portuguese, Spanish
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE
IVANOV, MARGARET
Provider ID: 272876
Board Certified Specialty: No
 persevering
 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1326427014
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE
JABBOUR, MOUSSA
Provider ID: 256658
Board Certified Specialty: No
 persevering
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1730507872
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNAL MEDICINE
KATZ, YISRAEL
Provider ID: 272937
Board Certified Specialty: No
 persevering
 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1730507872
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

INTERNATIONAL MEDICINE
KVIATKOVSKY, MILLA

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供
者。請注意,某些服務可能需要精神健康服務提供者獲得
Blue Shield 的事先授權,然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單,請造訪
blueshieldca.com/fad
D3. 專業提供者目錄

Provider ID: 274004
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366855355
Provider English Spoken: Y
Provider Language(s)
   Spoken: Finnish, French, Hebrew, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
   8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
LAGO HERNANDEZ, CARLOS
Provider ID: 238623
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1558756270
Provider English Spoken: Y
Provider Language(s)
   Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
   8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
KVIATKOVSKY, MILLA
Provider ID: 274002
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7000
After Hours Phone: (858) 657-7000
Provider Gender: Female
NPI: 1366855355
Provider English Spoken: Y
Provider Language(s)
   Spoken: Finnish, French,
   Hebrew, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
   8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
LAGO HERNANDEZ, CARLOS
Provider ID: 238624
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1558756270
Provider English Spoken: Y
Provider Language(s)
   Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
   8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
LAM, MICHAEL
Provider ID: 274409
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1578974259
Provider English Spoken: Y
D3. 專業提供者目錄

- **INTERNAL MEDICINE**
  - **MARTINEZ, ARMANDO**
    - Provider ID: 291422
    - Board Certified Specialty: No
    - 9300 CAMPUS POINT DR
      - Phone: (800) 926-8372
      - Fax: (888) 539-8781
      - After Hours Phone: (800) 926-8372
    - Min/Max Age: 18\999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-F
      - 8:00AM-5:00PM
    - Website: N/A
  - **MAJITHIA, AMIT**
    - Provider ID: 255881
    - Board Certified Specialty: No
    - 9350 CAMPUS POINT DR
      - Phone: (800) 926-8273
      - After Hours Phone: (800) 926-8273
    - Provider Gender: Male
    - NPI: 1801091459
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 18\999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Website: N/A
  - **NOKES, BRANDON**
    - Provider ID: 287581
    - Board Certified Specialty: No
    - 9300 CAMPUS POINT DR
      - Phone: (800) 926-8273
      - Fax: (888) 539-8781
      - After Hours Phone: (800) 926-8273
    - Provider Gender: Male
    - NPI: 1487040051
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 18\999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Website: N/A
  - **POTOK, OLIVIA**
    - Provider ID: 272707
    - Board Certified Specialty: No
    - 9350 CAMPUS POINT DR
      - Phone: (800) 926-8273
      - Fax: (888) 539-8781
      - After Hours Phone: (800) 926-8273
    - Provider Gender: Female
    - NPI: 1073951323
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 18\999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Website: N/A
  - **SEBASKY, MEGHAN**
    - Provider ID: 273963
    - Board Certified Specialty: No
    - 9300 CAMPUS POINT DR
      - Phone: (800) 926-8273
      - Fax: (888) 539-8781
      - After Hours Phone: (800) 926-8273
    - Provider Gender: Female
    - NPI: 1470400051
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 18\999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Website: N/A
D3. 專業提供者目錄

Phone: (619) 471-9186
After Hours Phone: (619) 471-9186
Provider Gender: Female
NPI: 1538351408
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
SMITH, CHELSEY
Provider ID: 239921
Board Certified Specialty: No
9350 CAMPUS POINT DR
STE 2B
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1013264506
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
SEBASKY, MEGHAN
Provider ID: 273964
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538351408
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
TAYLOR, DAVID
Provider ID: 274470
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033572995
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
WANG, ANGELA
Provider ID: 259536
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1730133976
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
D3. 专业提供者目录

【Accessibility: CONTACT PROVIDER】

【Hours: M-F 8:00AM-5:00PM】

【Website: N/A】

**INTERNAL MEDICINE**

**YADLAPATI, RENA**

Provider ID: 238587

Board Certified Specialty: No

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1548597784

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**INTERNAL MEDICINE**

**YANG, JENNY**

Provider ID: 283025

Board Certified Specialty: No

9300 CAMPUS POINT DR

LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1346636453

Provider English Spoken: Y

Provider Language(s) Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**INTERVENTIONAL CARDIOLOGY**

**AL KHIAMI, BELAL**

Provider ID: 275993

Board Certified Specialty: No

9434 MEDICAL CENTER DR

FL 1

LA JOLLA, CA 92037

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, UCSD MEDICAL CTR, UCSD LA JOLLA

JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A
D3. Professional Providers Directory

Provider: JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC
Provider ID: 300062
Board Certified Specialty: No
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERVENTIONAL CARDIOLOGY

CRUZ RODRIGUEZ, JOSE
Provider ID: 300062
Board Certified Specialty: No
Hospital Affiliation: LAKEWOOD REGIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

GOVEA, ALAYN
Provider ID: 303097
Board Certified Specialty: No
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

TAUB, PAM
Provider ID: 277682
Board Certified Specialty: No
Hospital Affiliation: LAKEWOOD REGIONAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
American Sign Language (ASL): N
 shrugged Accessibility: CONTACT PROVIDER
 shrugging Hours: M-F 8:00AM-5:00PM
 shrugging Website: N/A

**INTERVENTIONAL CARDIOLOGY**

**WETTERSTEN, NICHOLAS**
Provider ID: 210604
Board Certified Specialty: No

9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037

Phone: (858) 657-8530
Fax: (858) 657-8814

After Hours Phone: (858) 657-8530
Provider Gender: Male
NPI: 1063701068

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

**MATERNAL AND FETAL MEDICINE**

**BALLAS, JERASIMOS**
Provider ID: 209561
Board Certified Specialty: No

American Sign Language (ASL): N

Provider Gender: Female
NPI: 1871767384

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA, JOHN SALLY THORNTON, EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 16\999

American Sign Language (ASL): N

Provider Gender: Female
NPI: 1245627421

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N
D3. 專業提供者目錄

MATERNAL AND FETAL MEDICINE

HULL, ANDREW
Provider ID: 209482
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-8745
After Hours Phone: (858) 657-8745
Provider Gender: Male
NPI: 1902862121
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

LAURENT, LOUISE
Provider ID: 208639
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1770532707
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MELBER, DORA
Provider ID: 240599
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

MOORE, THOMAS
Provider ID: 208642
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-8745
After Hours Phone: (858) 657-8745
Provider Gender: Male
NPI: 1184682379
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
D3. 魅力提供者目錄

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE
WOELKERS, DOUGLAS
Provider ID: 209383
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7200
After Hours Phone: (858) 657-7200
Provider Gender: Male
NPI: 1013965748
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
SCRIPPS MERCY HOSPITAL CHULA VISTA,
SCRIPPS MEMORIAL HOSPITAL ENCINITAS,
PALOMAR MEDICAL CENTER,
UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY THORNTON,
UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

BAI-TONG, SHIYU
Provider ID: 283287
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 249-5800
After Hours Phone: (858) 249-5800
Provider Gender: Female
NPI: 1528454188
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

NEONATAL / PERINATAL MEDICINE
DEL ROSARIO, PAMELA
Provider ID: 295001
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858) 249-5800
Provider Gender: Female
NPI: 1952691941
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, RADY
### MEDICINE

#### MARC AURELE, KRISHELLE
Provider ID: 206207
Board Certified Specialty: No
- **Address:** 9300 CAMPUS POINT DR LA JOLLA, CA 92037
- **Phone:** (858) 249-5800
- **Fax:** (858) 249-5839
- **After Hours Phone:** (858) 249-5800
- **Provider Gender:** Female
- **NPI:** 1952503435
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\19
- **American Sign Language (ASL):** N

#### MATOBA, NANA
Provider ID: 299893
Board Certified Specialty: No
- **Address:** 9888 GENESEE AVE LA JOLLA, CA 92037
- **Phone:** (858) 626-4123
- **Fax:** (858) 633-7998
- **After Hours Phone:** (858) 626-4123
- **Provider Gender:** Female
- **NPI:** 1801952197
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Japanese
- **Cultural Competency:** N
- **Hospital Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO

### NEONATAL / PERINATAL MEDICINE

#### HIEITALATI, SAMANTHA
Provider ID: 294252
Board Certified Specialty: No
- **Address:** 9300 CAMPUS POINT DR LA JOLLA, CA 92037
- **Phone:** (858) 249-5800
- **Fax:** (858) 249-5839
- **After Hours Phone:** (858) 249-5800
- **Provider Gender:** Female
- **NPI:** 1245617489
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO

#### MARC AURELE, KRISHELLE
Provider ID: 206209
Board Certified Specialty: No
- **Address:** 9300 CAMPUS POINT DR LA JOLLA, CA 92037
- **Phone:** (858) 249-5800
- **Fax:** (858) 249-5839
- **After Hours Phone:** (858) 249-5800
- **Provider Gender:** Female
- **NPI:** 1952503435
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\19
- **American Sign Language (ASL):** N

#### MATOBA, NANA
Provider ID: 299893
Board Certified Specialty: No
- **Address:** 9300 CAMPUS POINT DR LA JOLLA, CA 92037
- **Phone:** (858) 626-4123
- **Fax:** (858) 633-7998
- **After Hours Phone:** (858) 626-4123
- **Provider Gender:** Female
- **NPI:** 1801952197
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Japanese
- **Cultural Competency:** N
- **Hospital Affiliation:** RADY CHILDRENS HOSPITAL SAN
### NEONATAL / PERINATAL MEDICINE

**MATOBA, NANA**  
Provider ID: 297977  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
STE 8  
LA JOLLA, CA 92037  
Phone: (858) 657-7000  
Fax: (858) 249-5839  
After Hours Phone: (858) 657-7000  
Provider Gender: Female  
NPI: 1801952197  
Provider English Spoken: Y  
Provider Language(s) Spoken: Japanese  
Cultural Competency: N  
Hospital Affiliation: Rady Childrens Hospital San Diego  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**MESTAN, KAREN**  
Provider ID: 285931  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (858) 249-5800  
Fax: (858) 249-5839  
After Hours Phone: (858) 249-5800  
Provider Gender: Female  
NPI: 1942253356  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Rady Childrens Hospital San Diego  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**NYMAN, KATHERINE**  
Provider ID: 301824  
Board Certified Specialty: No  
9888 GENESEE AVE  
LA JOLLA, CA 92037  
Phone: (858) 626-4123  
Fax: (760) 633-7998  
After Hours Phone: (858) 626-4123  
Provider Gender: Female  
NPI: 1003260951  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Rady Childrens Hospital San Diego  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N

### NEONATAL / PERINATAL MEDICINE

**RAMOS, CARLOS**  
Provider ID: 206062  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
STE 8  
LA JOLLA, CA 92037  
Phone: (858) 249-5800  
Fax: (619) 543-3812  
After Hours Phone: (858) 249-5800  
Provider Gender: Male  
NPI: 1205047545  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD Medical Ctr, El Centro  
Regional Medical Center, Southwest HealthCare  
Inland Valley Hospital, Southwest HealthCare  
Rancho Springs Hospital, Rady Childrens Hospital  
San Diego, UCSD La Jolla  
John Sally Thornton  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N
D3. 專業提供者目錄

NEONATAL / PERINATAL MEDICINE
SAJTI, ENIKO
Provider ID: 206170
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 249-5800
Fax: (858) 249-5839
After Hours Phone: (858) 249-5800
Provider Gender: Female
NPI: 1649433103
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SAUER, CHARLES
Provider ID: 303907
Board Certified Specialty: No
9888 GENESEE AVE
LA JOLLA, CA 92037
Phone: (858) 626-4123
Fax: (760) 633-7998
After Hours Phone: (858) 626-4123
Provider Gender: Male
NPI: 1538388988
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY
BEVINS, ELIZABETH
Provider ID: 277726
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

<table>
<thead>
<tr>
<th>Professional Provider Directory</th>
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<tbody>
<tr>
<td><strong>After Hours Phone</strong>: (800) 926-8273</td>
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<tr>
<td>Provider Gender: Female</td>
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<tr>
<td>NPI: 1013395151</td>
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<tr>
<td>Provider English Spoken: Y</td>
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<tr>
<td>Cultural Competency: N</td>
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<tr>
<td>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA</td>
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<tr>
<td>JOHN SALLY THORNTON</td>
</tr>
<tr>
<td>Medi-Cal Open Panel: Yes</td>
</tr>
<tr>
<td>Min/Max Age: 0\999</td>
</tr>
<tr>
<td>American Sign Language (ASL): N</td>
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<tr>
<td>Accessibility: CONTACT PROVIDER</td>
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<tr>
<td>Hours: M-F 8:00AM-5:00PM</td>
</tr>
<tr>
<td>Website: N/A</td>
</tr>
</tbody>
</table>

**NEUROLOGY**

**IRAGUIMADOZ, VICENTE**

Provider ID: 246701

Board Certified Specialty: No

9350 CAMPUS POINT DR LA JOLLA, CA 92037

Phone: (858) 657-8540

After Hours Phone: (858) 657-8540

Provider Gender: Male

NPI: 1053326710

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**LEGER, GABRIEL**

Provider ID: 247609

Board Certified Specialty: No

9444 MEDICAL CENTER DR LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1720367899

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**LEE, DAVID**

Provider ID: 246264

Board Certified Specialty: No

9350 CAMPUS POINT DR STE LLB LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1871884130

Provider English Spoken: Y

Provider Language(s) Spoken: Korean

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**QAYOUMI, WALI**
Provider ID: 284369
Board Certified Specialty: No
9500 GILMAN DR STE 2069
LA JOLLA, CA 92093
Phone: (858) 822-5881
Fax: (888) 539-8781
After Hours Phone: (858) 822-5881
Provider Gender: Male
NPI: 1093178220
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEUROLOGY
QAYOUMI, WALI
Provider ID: 284371
Board Certified Specialty: No
9350 CAMPUS POINT DR STE LLB
LA JOLLA, CA 92037
Phone: (619) 284-3746
Fax: (888) 579-8781
After Hours Phone: (619) 284-3746
Provider Gender: Male
NPI: 1093178220
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEUROLOGY
SCHULTE, JESSICA
Provider ID: 284819
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1467870576
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
BINDER, PRATIBHA
Provider ID: 273225
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174758031
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
BONDRE, IOANA
Provider ID: 284310
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1326579863
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
DELCORE, LAURA
Provider ID: 291323
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
BONDRE, IOANA
Provider ID: 284311
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1326579863
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
DELCORE, LAURA
Provider ID: 291335
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
DRIEBE, AMY
Provider ID: 291334
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1730507567
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
DRIEBE, AMY
Provider ID: 291324
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

LA JOLLA, CA 92037
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1730507567

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
GUPTA, PRATIMA
Provider ID: 257546
Board Certified Specialty: No
📞 8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891749842

Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
HARVEY, SCOTT
Provider ID: 278916
Board Certified Specialty: No
📞 9350 CAMPUS POINT DR
LA JOLLA, CA 92037
📞 Phone: (800) 923-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 923-8273
Provider Gender: Male
NPI: 1457662868

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
HOANG, MAI
Provider ID: 208295
Board Certified Specialty: No
📞 8910 VILLA LA JOLLA DR STE 200
LA JOLLA, CA 92037
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104143593

Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A
OBSTETRICS / GYNECOLOGY

HOM-TEDLA, MARIANNE
Provider ID: 242752
Board Certified Specialty: No
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1972047397
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
KLEIN, DAVID
Provider ID: 271559
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1780073635
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
LAMALE-SMITH, LEAH
Provider ID: 286230
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396904876
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Your PCP’s doctor group may have their own network mental health services providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require Blue Shield mental health services provider pre-authorization before being covered.

To access the mental health services provider list online, please visit blueshieldca.com/fad.
D3. 專業提供者目錄

MACKAY, GILLIAN  
Provider ID: 200964  
Board Certified Specialty: No  
8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1770702177  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

OSTEBRITICS / GYNECOLOGY

MEADOWS, AUDRA  
Provider ID: 285740  
Board Certified Specialty: No  
8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1467585521  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A  

OSTEBRITICS / GYNECOLOGY

MELENDEZ, ARIANA  
Provider ID: 299920  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1295232973  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A
OBSTETRICS / GYNECOLOGY
PICKETT, CHARLOTTE
Provider ID: 299976
Board Certified Specialty: No
Provider ID: 299977
Board Certified Specialty: No

Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
PICKETT, CHARLOTTE
Provider ID: 284285
Board Certified Specialty: No
Provider ID: 284295
Board Certified Specialty: No

Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY
RIVAS, RENEE
Provider ID: 284296
Board Certified Specialty: No
9333 GENESEE AVE
STE 340
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295263861
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SUYAMA, JULIE
Provider ID: 284289
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1306372800
 Provider English Spoken: Y
 Provider Language(s)
 Spoken: Spanish
 Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY
THOMSON, SAMANTHA
Provider ID: 285173
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 200
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689013468
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
OCCUPATIONAL THERAPIST
AMARAL, MARGARET
Provider ID: 258303
Board Certified Specialty: No
9350 CAMPUS POINT DR
STE LLĐ
LA JOLLA, CA 92037
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
NPI: 1689874521
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OCCUPATIONAL THERAPIST
COLLINS, RESENIA
Provider ID: 258356
Board Certified Specialty: No
9350 CAMPUS POINT DR
STE LLĐ
LA JOLLA, CA 92037
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
NPI: 1689874521
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OCCUPATIONAL THERAPIST
SMITH, EMILY
Provider ID: 258537
Board Certified Specialty: No
9350 CAMPUS POINT DR
STE LLĐ
LA JOLLA, CA 92037
Phone: (855) 543-0333
Fax: (858) 657-6873
After Hours Phone: (855) 543-0333
Provider Gender: Female
NPI: 1417337403
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OCCUPATIONAL THERAPIST
MUNCADA, CAESAR
Provider ID: 288724
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790268100
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

N
 Accessibility: CONTACT PROVIDER
 ☑️ Hours: M-F
  8:00AM-5:00PM
 ☐ Website: N/A

OPHTHALMOLOGY

BAXTER, SALLY
Provider ID: 272787
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (888) 539-8781
After Hours Phone: (858) 534-6290
Provider Gender: Female
NPI: 1912325184
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
  8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY

JIN, MAN
Provider ID: 299954
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1073010120
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPHTHALMOLOGY

JIN, MAN
Provider ID: 299956
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

Provider Gender: Female
NPI: 1073010120
 PROVIDER
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OPHTHALMOLOGY
MOVAGHAR, MANSOOR
Provider ID: 215055
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497792220
 Provider English Spoken: Y
 Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OPHTHALMOLOGY
PUIG LLANO, MANUEL
Provider ID: 299965
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1427102979
 Provider English Spoken: Y
 Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: Scripps Mercy Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OPHTHALMOLOGY
RAHMATNEJAD, KAMRAN
Provider ID: 300039
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699268292
 Provider English Spoken: Y
 Provider Language(s) Spoken: French, German, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: Scripps Mercy Hospital, Sharp Memorial Hospital, Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OPHTHALMOLOGY
SATTERFIELD, KELLIE
Provider ID: 305303
Board Certified Specialty: No
9834 GENESEE AVE STE 200
LA JOLLA, CA 92037
Phone: (858) 457-3050
Fax: (619) 296-4622
After Hours Phone: (858) 457-3050
Provider Gender: Female

Your PCP's provider network may have its own network of mental health providers. Please see the list below. You can contact these providers directly. Please note, some services may require the provider to have prior authorization from Blue Shield before the service can be covered.

To access the mental health provider list online, please visit blueshieldca.com/fad
D3. 專業提供者目錄

NPI: 1629509336
Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
  8:00AM-5:00PM
Website: N/A

SCHONBACH, ETIENNE
Provider ID: 284432
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1073040580
Provider English Spoken: Y
Provider Language(s)
  Spoken: German
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SONG, DELU
Provider ID: 284425
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932605649
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU
  8:30AM-4:00PM
W-F 8:30AM-1:00PM
Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE
Provider ID: 299935
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932605649
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SHEILS, CATHERINE
Provider ID: 299937
Board Certified Specialty: No
9834 GENESEE AVE STE 200
LA JOLLA, CA 92037
Phone: (858) 457-3050
Fax: (858) 457-0851
After Hours Phone: (858) 457-3050
Provider Gender: Female
NPI: 1932605649
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SONG, DELU
Provider ID: 284425
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
### General Information
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1437689536
- Provider English Spoken: Y
- Provider Language(s): Chinese, Mandarin
- Cultural Competency: N
- Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

### OPTOMETRIST
#### AOTO, KIM
Provider ID: 296798
Board Certified Specialty: No
- 9850 GENESEE AVE STE 310
  LA JOLLA, CA 92037
- Phone: (800) 898-2020
- Fax: (844) 897-3788
- After Hours Phone: (800) 898-2020
- Provider Gender: Female
- NPI: 1780935650
- Provider English Spoken: Y
- Provider Language(s): Vietnamese
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

### OPTOMETRIST
#### HOO, PAMELA
Provider ID: 269621
Board Certified Specialty: No
- 9350 CAMPUS POINT DR
  LA JOLLA, CA 92037
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Provider Gender: Female
- NPI: 1275566010
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A
D3. Professional Provider Directory

**OPTOMETRIST**

**JOMOC, CAITLIN**
Provider ID: 299915
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**OPTOMETRIST**

**MCCLEAN, ESMERALDA**
Provider ID: 269907
Board Certified Specialty: No
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 534-8293
After Hours Phone: (858) 534-6290
Provider Gender: Female
NPI: 1962817981
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**OPTOMETRIST**

**VO, ANDREW**
Provider ID: 304148
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790291565
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

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To online access the list of mental health service providers, please visit blueshieldca.com/fad.
D3. 專業提供者目錄

**OPTOMETRIST**  
**YU, CAROL**  
Provider ID: 258078  
Board Certified Specialty: No  
9415 CAMPUS POINT DR  
LA JOLLA, CA 92093  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1639697451  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**OPTOMETRIST**  
**YU, CAROL**  
Provider ID: 301681  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1639697451  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**OPTOMETRIST**  
**YU, CAROL**  
Provider ID: 301682  
Board Certified Specialty: No  
9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1639697451  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**OTOLARYNGOLOGY**  
**BRUMUND, KEVIN**  
Provider ID: 299637  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1033193669  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**OTOLARYNGOLOGY**  
**BRUMUND, KEVIN**  
Provider ID: 299636  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1033193669  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**OTOLARYNGOLOGY**  
**BRUMUND, KEVIN**  
Provider ID: 299633
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<th>Name</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Affiliation</th>
<th>Phone</th>
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<td>CALIFANO, JOSEPH</td>
<td>299463</td>
<td>No</td>
<td>UCSD MEDICAL CTR, UCSD LA JOLLA</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>Male</td>
<td>1881652972</td>
<td>Y</td>
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<td>CALIFANO, JOSEPH</td>
<td>299460</td>
<td>No</td>
<td>UCSD MEDICAL CTR, UCSD LA JOLLA</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>Male</td>
<td>1881652972</td>
<td>Y</td>
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<td>COFFEY, CHARLES</td>
<td>299584</td>
<td>No</td>
<td>UCSD MEDICAL CTR, UCSD LA JOLLA</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>Male</td>
<td>1932297330</td>
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Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299585
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932297330
Provider English Spoken: Y
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

COFFEY, CHARLES
Provider ID: 299580
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932297330
Provider English Spoken: Y
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 299564
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590
Provider Gender: Male
NPI: 1588988919
Provider English Spoken: Y
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

DECONDE, ADAM
Provider ID: 299570
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
D3. 專業提供者目錄

NPI: 1588988919
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

OTOLARYNGOLOGY
DECONDE, ADAM
Provider ID: 299565
- Board Certified Specialty: No
- 9350 CAMPUS POINT DR
  LA JOLE, CA 92037
- Phone: (858) 657-8590
- After Hours Phone: (858) 657-8590
- Provider Gender: Male
- NPI: 1588988919
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

OTOLARYNGOLOGY
FRIEDMAN, RICK
Provider ID: 299533
- Board Certified Specialty: No
- 3855 HEALTH SCIENCES DR
  LA JOLE, CA 92093
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1982708558
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: PIH HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSPITAL, CHILDREN'S HOSPITAL, HEALTH GOOD SAMARITAN CENTER INC, ANAHEIM GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC, CLAYTON GLOBAL MEDICAL CENTER INC, UCSD LA JOLE, JOHN SALLY THORNTON, UCSD LA JOLE JOHN SALLY THORNTON, UCSD MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

Your PCP's physician group may have its own network of mental health service providers. Please see the list below. You can contact these providers directly. Please note, some services may require prior authorization from Blue Shield before they can be covered.

To view the mental health service providers list online, please visit blueshieldca.com/fad.
D3. Professional Provider Directory

MEDICAL CENTER INC, CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
FRIEDMAN, RICK
Provider ID: 299528
Board Certified Specialty: No
4900 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982708558
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
GILANI, SAPIDEH
Provider ID: 299562
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003825571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
### D3. 專業提供者目錄

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<td>Provider ID: 299558</td>
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<td>Phone: (800) 926-8273</td>
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<td>3855 HEALTH SCIENCES DR</td>
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<tr>
<td>LA JOLLA, CA 92037</td>
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<tr>
<td>Phone: (800) 926-8273</td>
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### OTOLARYNGOLOGY

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D3. 專業提供者目錄

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- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
GREENE, JACQUELINE
Provider ID: 272958
Board Certified Specialty: No

 9300 CAMPUS POINT DR
 STE LLA
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1144583931

 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
HARRIS, JEFFREY
Provider ID: 299574
Board Certified Specialty: No

 9350 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1417988783

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
HARRIS, JEFFREY
Provider ID: 299578
Board Certified Specialty: No

 9300 CAMPUS POINT DR
 LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1417988783

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
HARRIS, JEFFREY
Provider ID: 299573
Board Certified Specialty: No

 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1417988783

 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
HARRIS, JEFFREY
Provider ID: 299573
Board Certified Specialty: No

 9400 CAMPUS POINT DR
 LA JOLLA, CA 92093
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1417988783

 Provider English Spoken: Y
D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
HOM, DAVID
Provider ID: 299517
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1659305027
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
HOM, DAVID
Provider ID: 299512
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1659305027
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
HUSSEMAN, JACOB
Provider ID: 301051
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1659305027
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 专业提供者目录

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124034053
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
KARI, ELINA
Provider ID: 299442
Board Certified Specialty: No
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780860536
Provider English Spoken: Y
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Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
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Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
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OSTOLARYNGOLOGY
KARI, ELINA
Provider ID: 299444
Board Certified Specialty: No
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

1781
OTOLARYNGOLOGY

KARI, ELINA
Provider ID: 299447
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY
Provider ID: 299484
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1891858379
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY
Provider ID: 299478
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1891858379
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
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D3. PROVIDER

Website: N/A

OTOLARYNGOLOGY
MAGIT, ANTHONY
Provider ID: 299483
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1891858379
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
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Website: N/A

OTOLARYNGOLOGY
MATSUOKA, AKIHIRO
Provider ID: 299589
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1669630653
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
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OTOLARYNGOLOGY
MATSUOKA, AKIHIRO
Provider ID: 299593
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
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NPI: 1669630653
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OTOLARYNGOLOGY
NGUYEN, QUYEN
Provider ID: 299605
Board Certified Specialty: No
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LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
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American Sign Language (ASL): N
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Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

OTOLARYNGOLOGY
NGUYEN, QUYEN
Provider ID: 299609
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477524452
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
VAHABZADEH-HAGH, ANDREW
Provider ID: 299504
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 822-6197
After Hours Phone: (858) 822-6197
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
D3. 專業提供者目錄

Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
VAHABZADEH-HAGH, ANDREW
Provider ID: 299510
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
VAHABZADEH-HAGH, ANDREW
Provider ID: 299506
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
VAHABZADEH-HAGH, ANDREW
Provider ID: 299505
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WATSON, DEBORAH
Provider ID: 299643
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346270816
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WATSON, DEBORAH
1785
### D3. 專業提供者目錄

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</tbody>
</table>

您的 PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參阅下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
OTOLARYNGOLOGY
WEISSBROD, PHILIP
Provider ID: 299611
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590
Provider Gender: Male
NPI: 1366590853
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS
GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WEISSBROD, PHILIP
Provider ID: 299613
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
YAN, CAROL
Provider ID: 298416
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
American Sign Language (ASL): N

Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDREN'S HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL
AISAGBONHI, OMONIGHO
Provider ID: 201304
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043571045
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL
AISAGBONHI, OMONIGHO
Provider ID: 275750
Board Certified Specialty: No
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1043571045
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
YAN, CAROL
Provider ID: 242138
Board Certified Specialty: No
9350 CAMPUS POINT DR
STE LLA
LA JOLLA, CA 92037
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDREN'S HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

ALLEN, ELIZABETH
Provider ID: 275757
Board Certified Specialty: No
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174814065
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1184674145
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL
DON, MICHELLE
Provider ID: 247149
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 249-4410
After Hours Phone: (858) 249-4410
Provider Gender: Female
NPI: 1205288396
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL
BUI, JACK
Provider ID: 275746
Board Certified Specialty: No
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1942529821
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL
D3. 專業提供者目錄

DON, MICHELLE
Provider ID: 275816
Board Certified Specialty: No
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1205288396
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL
HU, JINGJING
Provider ID: 243965
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1538574744
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC CLINICAL
ELKIND, JAE
Provider ID: 284903
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1922497700
Provider English Spoken: Y
Cultural Competency: N

PATHOLOGY ANATOMIC CLINICAL
ROMA, ANDRES
Provider ID: 275827
Board Certified Specialty: No
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1538574744
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
NPI: 1295912657
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
 8:00AM-5:00PM  
 Website: N/A  

PATHOLOGY ANATOMIC  
CLINICAL  
VAVINSKAYA, VERA  
Provider ID: 275840  
Board Certified Specialty: No  
9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
 Provider Gender: Female  
 NPI: 1174757181  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\999  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
 8:00AM-5:00PM  
 Website: N/A  

PATHOLOGY ANATOMIC  
CLINICAL  
ZARE, SOMAYE  
Provider ID: 275814  
Board Certified Specialty: No  
9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 Provider Gender: Female  
 NPI: 1700334802  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Farsi  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, UCSD LA JOLLA  
 JOHN SALLY THORNTON  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\999  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
 8:00AM-5:00PM  
 Website: N/A  

PATHOLOGY ANATOMIC  
CLINICAL  
ZARE, SOMAYE  
Provider ID: 203172  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
 Provider Gender: Female  
 NPI: 1700334802  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Farsi  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, UCSD LA JOLLA  
 JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC

ZHANG, HAIYAN
Provider ID: 275841
Board Certified Specialty: No
1 9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1457617110
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, SCIRPPS MEMORIAL HOSPITAL, SCIRPPS MERCY HOSPITAL, SCIRPPS MERCY HOSPITAL CHULA VISTA, SCIRPPS MEMORIAL HOSPITAL ENCINITAS, SCIRPPS GREEN HOSPITAL, SCIRPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

AINSWORTH, DELISSA
Provider ID: 243366
Board Certified Specialty: No
9444 MEDICAL CENTER DR
STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750734893
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

ALBRIGHT, KELSEY
Provider ID: 284764
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1090312025
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
D3.  專業提供者目錄

LA JOLLA, CA 92037

Provider Gender: Female
NPI: 1235653148

PHYSICIANS ASSISTANT
ARMEE, GARY
Provider ID: 247036
Board Certified Specialty: No
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
ALLERS, JENNA
Provider ID: 301037
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
BOYD, LISA
Provider ID: 217650
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
BRUECKNER, TAMMIE
Provider ID: 255557
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

PHYSICIANS ASSISTANT
CHERRY, REENA
Provider ID: 269494
Board Certified Specialty: No
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
COOKISH, DAVID
Provider ID: 286591
Board Certified Specialty: No
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
CRIPE, TAYLOR
Provider ID: 210983
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
DEMASCO, MICHAEL
Provider ID: 278969
Board Certified Specialty: No
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
DEMOOR, PATRICIA
Provider ID: 212879
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477721702
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
DOUGHERTY, CLARA
Provider ID: 295925
Board Certified Specialty: No
9850 GENESEE AVE STE 440
LA JOLLA, CA 92037
Phone: (858) 453-5944
Fax: (858) 429-7925
After Hours Phone: (858) 453-5944
Provider Gender: Male
NPI: 1427068972
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
DOTY, PATRICIA
Provider ID: 890
Board Certified Specialty: No
8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1046260855
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
HASEGAWA, CHRIS
Provider ID: 247205
Board Certified Specialty: No
8939 VILLA LA JOLLA DR
STE 110
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1477721702
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
926-8273
Provider Gender: Male
NPI: 1225698962
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
HIGGINS, JOSHUA
Provider ID: 287136
Board Certified Specialty: No
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861624181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
HUNTER, JACOB
Provider ID: 298431
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1114459765
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
HUNTER, JACOB
Provider ID: 298432
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1114459765
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
HUNTER, JACOB
Provider ID: 298429
Board Certified Specialty: No
9400 CAMPUS POINT DR
D3. 專業提供者目錄

LA JOLLA, CA 92093
≥ Phone: (800) 926-8273
Fax: (888) 539-8781
≥ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1114459765
≥ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
≥ Accessibility: CONTACT PROVIDER
≥ Website: N/A

PHYSICIANS ASSISTANT
HUNTER, JACOB
Provider ID: 279334
Board Certified Specialty: No
≥ 8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
≥ Phone: (800) 826-8273
Fax: (888) 539-8781
≥ After Hours Phone: (800) 826-8273
Provider Gender: Male
NPI: 1114459765
≥ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
≥ Accessibility: CONTACT PROVIDER
≥ Website: N/A

PHYSICIANS ASSISTANT
LIN, JOYCE
Provider ID: 265147
Board Certified Specialty: No
≥ 3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
≥ Phone: (858) 554-1212
≥ After Hours Phone: (800) 888-9268
Provider Gender: Female
NPI: 1427681022
≥ Provider English Spoken: Y
Provider Language(s) Spoken: Taiwanese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
≥ Accessibility: CONTACT PROVIDER
≥ Website: N/A

PHYSICIANS ASSISTANT
LIN, JOYCE
Provider ID: 265146
Board Certified Specialty: No
≥ 9400 CAMPUS POINT DR
LA JOLLA, CA 92093
≥ Phone: (800) 888-9268
Fax: (888) 539-8781
≥ After Hours Phone: (800) 888-9268
Provider Gender: Female
NPI: 1427681022
≥ Provider English Spoken: Y
Provider Language(s) Spoken: Taiwanese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
≥ Accessibility: CONTACT PROVIDER
≥ Website: N/A

PHYSICIANS ASSISTANT
LUONG, TRAN
Provider ID: 279014
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1821532292
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
MARTIN, HALEY
Provider ID: 305027
Board Certified Specialty: No
9434 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093440836
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
LUONG, TRAN
Provider ID: 279015
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1821532292
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
MARTIN, HALEY
Provider ID: 305025
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1821532292
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish, Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
MCADAMS, JOSEPH
Provider ID: 280612
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
D3. 專業提供者目錄

- After Hours Phone: (800) 926-8273
  Provider Gender: Male
  NPI: 1104371251
  Provider English Spoken: Y
  Cultural Competency: N
  Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
  JOHN SALLY THORNTON
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  📌 Accessibility: CONTACT PROVIDER
  🌡 Hours: M-F 8:00AM-5:00PM
  🌐 Website: N/A

PHYSICIANS ASSISTANT
OKADA, MICHELLE
Provider ID: 278017
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497129860
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
ɦ Accessibility: CONTACT PROVIDER
ɦ Hours: M-F 8:00AM-5:00PM
ɦ Website: N/A

PHYSICIANS ASSISTANT
MERRILL, COREY
Provider ID: 258039
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386032308
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
ɦ Accessibility: CONTACT PROVIDER
ɦ Hours: M-F 8:00AM-5:00PM
ɦ Website: N/A

PHYSICIANS ASSISTANT
PELIO, DARREN
Provider ID: 293440
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 822-7967
Fax: (858) 822-6395
After Hours Phone: (858) 822-7967
Provider Gender: Male
NPI: 1386791028
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
ɦ Accessibility: CONTACT PROVIDER
ɦ Website: N/A

PHYSICIANS ASSISTANT
OKADA, MICHELLE
Provider ID: 278016
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497129860
D3. 專業提供者目錄

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<td>1386791028</td>
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<td>(888) 539-8784</td>
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<td>283583</td>
<td>No</td>
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<td>1356749451</td>
<td>(800) 926-8273</td>
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<td>1265960256</td>
<td>(619) 543-5540</td>
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<td>1265960256</td>
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*Accessibility: CONTACT PROVIDER
*Hours: M-F 8:00AM-5:00PM
*Website: N/A

**PHYSICIANS ASSISTANT**

**PERREAULT, MARK**

Provider ID: 283583
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8276
After Hours Phone: (800) 926-8276
Provider Gender: Male
NPI: 1356749451
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**PHYSICIANS ASSISTANT**

**ROBERTS, AUDREY**

Provider ID: 253254
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 657-7876
After Hours Phone: (858) 657-7876
Provider Gender: Female
NPI: 1265960256
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**PHYSICIANS ASSISTANT**

**SAIKHON, TALIA**

Provider ID: 293439
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800)
PHYSICIANS ASSISTANT
SANCHEZ, MICHAEL
Provider ID: 206907
Board Certified Specialty: No
8939 VILLA LA JOLLA DR
STE 110
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184135006
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
SCHWARTZEL, KEVIN
Provider ID: 214276
Board Certified Specialty: No
8910 VILLA LA JOLLA DR
STE 100
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1104277847
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
SHAUL, SHERA
Provider ID: 247976
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336659507
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
SHAUL, SHERA
Provider ID: 247975
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336659507
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
SPEH, BRIAN
Provider ID: 305010
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336659507
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
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<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>Female</td>
<td>1083823322</td>
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<td>277072</td>
<td>No</td>
<td>9350 CAMPUS POINT DR LA JOLLA, CA 92037</td>
<td>(800) 926-8273</td>
<td>(800) 926-8273</td>
<td>(800) 926-8273</td>
<td>Female</td>
<td>1942724042</td>
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<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
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<td>Female</td>
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<td>WAHLIN, TAMARA</td>
<td>299601</td>
<td>No</td>
<td>3855 HEALTH SCIENCES DR LA JOLLA, CA 92093</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>Female</td>
<td>1083823322</td>
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*After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124593926
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT

**Tesfai, Helen**
Provider ID: 277072
Board Certified Specialty: No
9350 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942724042
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**Wahlin, Tamara**
Provider ID: 299602
Board Certified Specialty: No
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083823322
Provider English Spoken: Y
Cultural Competency: N
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**Wahlin, Tamara**
Provider ID: 299601
Board Certified Specialty: No
3855 HEALTH SCIENCES DR LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083823322
Provider English Spoken: Y
Cultural Competency: N
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PHYSICIANS ASSISTANT
WEIR, JACQUELINE
Provider ID: 278202
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (800) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1760739049
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST
BOOTH, CHRISTOPHER
Provider ID: 209117
Board Certified Specialty: No
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1568893162
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST
BAILIS, JESSICA
Provider ID: 300043
Board Certified Specialty: No
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1780620906
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST
BOOTH, CHRISTOPHER
Provider ID: 209118
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1568893162
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PSYCHOLOGIST
BOUTELLE, KERRI
Provider ID: 302876
Board Certified Specialty: No
3344 N TORREY PINES CT
LA JOLLA, CA 92037
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Male
 NPI: 1780620906
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A
D3. 專業提供者目錄

**PSYCHOLOGIST**
**BOUTELLE, KERRI**
Provider ID: 240034
Board Certified Specialty: No
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1780620906
Psi Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**PSYCHOLOGIST**
**CHESHER, NICHOLAS**
Provider ID: 273812
9300 CAMPUS POINT DR LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124539697
Psi Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**PSYCHOLOGIST**
**CRANDAL, BRENT**
Provider ID: 291463
8950 VILLA LA JOLLA DR STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Male
NPI: 1780620906
Psi Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
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<tr>
<td>DUARTE, KRISTEN</td>
<td>255480</td>
<td>No</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>N</td>
<td>UCSD LA JOLLA JOHN SALLY</td>
<td>N/A</td>
</tr>
<tr>
<td>EICHEN, DAWN</td>
<td>259524</td>
<td>No</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>N</td>
<td>UCSD LA JOLLA JOHN SALLY</td>
<td>N/A</td>
</tr>
</tbody>
</table>
D3. 專業提供者目錄

Provider ID: 245715
Board Certified Specialty: No
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861043366
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
LINKE, SARAH
Provider ID: 273640
Board Certified Specialty: No
8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1487026415
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
LASSWELL, EVE
Provider ID: 208260
Board Certified Specialty: No
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1013483635
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
MAGINOT-CHESHER, TAMARA
Provider ID: 273224
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 534-7792
Fax: (619) 471-9017
After Hours Phone: (858) 534-7792
Provider Gender: Female
NPI: 1043441165
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RAYD CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
MENDEZ, ANDRES
Provider ID: 279058
Board Certified Specialty: No
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1841482692
Provider English Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
### MEDICAL CTR, UCSD LA JOLLA

**JOHN SALLY THORNTON**  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0–999  
American Sign Language (ASL): N

- **Accessibility:** CONTACT PROVIDER  
- **Hours:** M-F  
  8:00AM-5:00PM  
- **Website:** N/A

**PSYCHOLOGIST**

**REED, KRISTIE**  
Provider ID: 291395  
Board Certified Specialty: No  
8950 VILLA LA JOLLA DR  
STE C212  
LA JOLLA, CA 92037  
Phone: (800) 926-8372  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8372  
Provider Gender: Female  
NPI: 1679869556  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0–999  
American Sign Language (ASL): N

- **Accessibility:** CONTACT PROVIDER  
- **Website:** N/A

**PSYCHOLOGIST**

**TARLE, STEPHANIE**  
Provider ID: 303116  
Board Certified Specialty: No  
8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1659920403  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0–999  
American Sign Language (ASL): N

- **Accessibility:** CONTACT PROVIDER  
- **Website:** N/A

**PSYCHOLOGIST**

**REED, KRISTIE**  
Provider ID: 302867  
Board Certified Specialty: No  
3344 N TORREY PINES CT  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1679869556  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0–999  
American Sign Language (ASL): N

- **Accessibility:** CONTACT PROVIDER  
- **Website:** N/A

**PSYCHOLOGIST**

**ZLATAR, ZVINKA**  
Provider ID: 272712  
Board Certified Specialty: No  
9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1497139059  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0–999  
American Sign Language (ASL): N

- **Accessibility:** CONTACT PROVIDER  
- **Website:** N/A

**PULMONARY DISEASES**

**BAILEY, JACOB**  
Provider ID: 299925  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1598150039  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0–999  
American Sign Language (ASL):
### PULMONARY DISEASES

**JOSHUA, JISHA**  
Provider ID: 238060  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1023436417  
Provider English Spoken: Y  
Provider Language(s): Hindi, Malayalam  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**MCGUIRE, WILLIAM**  
Provider ID: 299987  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
Provider Gender: Male  
NPI: 1265896856  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**PEARCE, ALEX**  
Provider ID: 300054  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
Provider Gender: Female  
NPI: 1265896856  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**RADIOLOGY DIAGNOSTIC**

**BERMAN, ZACHARY**  
Provider ID: 269319  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
Provider Gender: Male  
NPI: 1033521190  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): N  
Website: N/A

**BRANCH, CODY**  
Provider ID: 283676  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
Provider Gender: Male  
NPI: 1851770622  
Provider English Spoken: Y
D3. 專業提供者目錄

Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
CARSWELL, AIMEE
Provider ID: 303056
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1619156635
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
FAZELI, SOUDABEH
Provider ID: 299993
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497721724
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, Providence Mission Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
FOWLER, KATHRYN
Provider ID: 201290
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255457941
Provider English Spoken: N
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
FORCIER, NANCY
Provider ID: 286955
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427430511
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
CHENG, KAREN
Provider ID: 283227
Professional Providers Directory

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD LA JOLLA
- JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\-999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**RADIOLOGY DIAGNOSTIC**

**GRISOM, MURRAY**
Provider ID: 271568
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1720465396
- Provider English Spoken: Y
- Provider Language(s) Spoken: Khmer, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON, Stanford Health Care,
- TRI-VALLEY
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\-999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**RADIOLOGY DIAGNOSTIC**

**HANNSUN, GEMMY**
Provider ID: 282790
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1992120026
- Provider English Spoken: Y
- Provider Language(s) Spoken: Khmer, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON, Stanford Health Care,
- TRI-VALLEY
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\-999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**RADIOLOGY DIAGNOSTIC**

**HORKY, LAURA**
Provider ID: 241854
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1598967812
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON, Stanford Health Care,
- TRI-VALLEY
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\-999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**RADIOLOGY DIAGNOSTIC**

**HORKY, LAURA**
Provider ID: 241855
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1598967812
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON, Stanford Health Care,
- TRI-VALLEY
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\-999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A
D3. 專業提供者目錄

Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

RADIOLOGY DIAGNOSTIC

JAFFRAY, PAUL

Provider ID: 299959
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1275700999

Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medit-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC

KONDILI, DHIMITER

Provider ID: 283144
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699125450

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ST MARY MEDICAL CENTER
Medit-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

JAZBEH, SAMMER

Provider ID: 271128
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1775700999

Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: Los Angeles General Medical Center
Medit-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

MARKS, ROBERT

Provider ID: 300066
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1952389934

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Medit-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC

RITCHIE, DAVID

Provider ID: 300033
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407201916

Provider English Spoken: Y
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessible: CONTACT PROVIDER  
Website: N/A  

RADIOLOGY DIAGNOSTIC  
SADAT, SAYED  
Provider ID: 299967  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1679000806  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessible: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

RADIOLOGY DIAGNOSTIC  
SEARLEMAN, ADAM  
Provider ID: 299950  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1134570641  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessible: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

RADIOLOGY DIAGNOSTIC  
SCHULTZ, HEATHER  
Provider ID: 240343  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1871910810  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Provider ID: 303050  
Board Certified Specialty: No  
9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1992919666  
Provider English Spoken: Y  
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR
D3. 專業提供者目錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
TADDONIO, MICHAEL
Provider ID: 240406
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386987261
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
THOMPSON, COLE
Provider ID: 299990
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1700315264
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
VAHDOT, NOUSHIN
Provider ID: 300069
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396700852
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
D3. 專業提供者目錄

N

Accessibility: CONTACT PROVIDER

Website: N/A

RADIOLOGY DIAGNOSTIC

YORK, VINCENT
Provider ID: 283518
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790146611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK
Provider ID: 206533
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285061390
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK
Provider ID: 246021
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780018416
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

CHIEN, PEI
Provider ID: 214699
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891260238
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780018416
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
CHIEN, PEI
Provider ID: 258324
Board Certified Specialty: No
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689321416
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

REGISTERED PHYSICAL THERAPIST
MAROLLA, ALICE
Provider ID: 241145
Board Certified Specialty: No
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477018729
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
HOUSELY, ALEXIS
Provider ID: 299971
Board Certified Specialty: No
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1992210090
Provider English Spoken: Y
Cultural Competency: N
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REGISTERED PHYSICAL THERAPIST
NUTHALL, KAITLIN
Provider ID: 202327
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1992210090
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
NUTHALL, KAITLIN
Provider ID: 258431
Board Certified Specialty: No
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1992210090
- Provider English Spoken: Y
- Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

REGISTERED PHYSICAL THERAPIST
RUDD, CHRISTOPHER
Provider ID: 258372
Board Certified Specialty: No
9350 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
- Phone: (855) 543-0333
- Fax: (858) 657-6873
- After Hours Phone: (855) 543-0333
Provider Gender: Male
NPI: 1831539337
- Provider English Spoken: Y
- Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

REGISTERED PHYSICAL THERAPIST
TRIMM, CASSIDY
Provider ID: 258442
Board Certified Specialty: No
9300 CAMPUS POINT DR STE LLD
LA JOLLA, CA 92037
- Phone: (855) 543-0333
- Fax: (858) 657-6873
- After Hours Phone: (855) 543-0333
Provider Gender: Male
NPI: 1740708478
- Provider English Spoken: Y
- Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A
D3. **Registered Physical Therapists**

**TRIMM, CASSIDY**  
Provider ID: 258443  
Board Certified Specialty: No  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): Yes  
Accessibility: CONTACT PROVIDER  
| Hours: M-F | 8:00AM-5:00PM  
Website: N/A  
Provider ID: 258480  
Provider Gender: Male  
NPI: 1740708478  
Provider English Spoken: Yes  
Cultural Competency: No  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): No  
Accessibility: CONTACT PROVIDER  
| Hours: M-F | 8:00AM-5:00PM  
Website: N/A  
Provider ID: 200968  
Provider Gender: Female  
NPI: 1689962169  
Provider English Spoken: Yes  
Cultural Competency: No  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
WILLIAMS, STACY

---

**VASQUEZ, BENJAMIN**  
Provider ID: 258480  
Board Certified Specialty: No  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): No  
Accessibility: CONTACT PROVIDER  
| Hours: M-F | 8:00AM-5:00PM  
Website: N/A  
Provider ID: 258480  
Provider Gender: Male  
NPI: 1568938413  
Provider English Spoken: Yes  
Cultural Competency: No  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): No  
Accessibility: CONTACT PROVIDER  
| Hours: M-F | 8:00AM-5:00PM  
Website: N/A  
Provider ID: 200968  
Provider Gender: Female  
NPI: 1689962169  
Provider English Spoken: Yes  
Cultural Competency: No  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
WILLIAMS, STACY
D3. 專業提供者目錄

YU, AUDRINE
Provider ID: 258481
Board Certified Specialty: No
9350 CAMPUS POINT DR
STE LLD
LA JOLLA, CA 92037
Phone: (858) 657-6879
Fax: (858) 657-6873
After Hours Phone: (858) 657-6879
Provider Gender: Female
NPI: 1639271208
Provider English Spoken: Y
Provider Language(s) Spoken: Sign Language
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SPEECH PATHOLOGIST
SCHIEDERMAYER, BENJAMIN
Provider ID: 288939
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1164979837
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY COLON SURGERY
LIU, SHANGLEI
Provider ID: 273364
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1043558653
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D3. Professional Providers Directory

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<th>Hours: M-F 8:00AM-5:00PM</th>
<th>Website: N/A</th>
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<td>LOPEZ, NICOLE</td>
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<td>3855 HEALTH SCIENCES DR</td>
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<td>LA JOLLA, CA 92093</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phone: (858) 822-6100</td>
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<td>After Hours Phone: (858) 822-6100</td>
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<td>Provider Gender: Female</td>
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<td>NPI: 1518163005</td>
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<td>Provider English Spoken: Y</td>
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<td>Cultural Competency: N</td>
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<td>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</td>
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<td>Accessibility: CONTACT PROVIDER</td>
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<td>Hours: M-F 8:00AM-5:00PM</td>
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</tr>
<tr>
<td>Website: N/A</td>
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<td></td>
</tr>
</tbody>
</table>

| SURGERY COLON SURGERY | | |
| RAMAMOORTHY, SONIA | | |
| Provider ID: 286371 | | |
| Board Certified Specialty: No | | |
| 3855 HEALTH SCIENCES DR | | |
| LA JOLLA, CA 92093 | | |
| Phone: (858) 822-6100 | | |
| After Hours Phone: (858) 822-6100 | | |
| Provider Gender: Female | | |
| NPI: 1518163005 | | |
| Provider English Spoken: Y | | |
| Cultural Competency: N | | |
| Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON | | |
| Medi-Cal Open Panel: Yes | | |
| Min/Max Age: 0\999 | | |
| American Sign Language (ASL): N | | |
| Accessibility: CONTACT PROVIDER | | |
| Hours: M-F 8:00AM-5:00PM | | |
| Website: N/A | | |

| SURGERY COLON SURGERY | | |
| PARRY, LISA | | |
| Provider ID: 278551 | | |
| Board Certified Specialty: No | | |
| 3855 HEALTH SCIENCES DR | | |
| LA JOLLA, CA 92093 | | |
| Phone: (858) 822-6100 | | |
| After Hours Phone: (858) 822-6100 | | |
| Provider Gender: Female | | |
| NPI: 1235369067 | | |
| Provider English Spoken: Y | | |
| Cultural Competency: N | | |
| Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON | | |
| Medi-Cal Open Panel: Yes | | |
| Min/Max Age: 0\999 | | |
| American Sign Language (ASL): N | | |
| Accessibility: CONTACT PROVIDER | | |
| Hours: M-F 8:00AM-5:00PM | | |
| Website: N/A | | |

| SURGERY GENERAL | | |
| AL-NOURI, OMAR | | |
| Provider ID: 211904 | | |
| Board Certified Specialty: No | | |
| 9434 MEDICAL CENTER DR FL 1 | | |
| LA JOLLA, CA 92037 | | |
| Phone: (800) 926-8273 | | |
| After Hours Phone: (800) 926-8273 | | |
| Provider Gender: Male | | |
| NPI: 1770742264 | | |
| Provider English Spoken: Y | | |
| Provider Language(s) Spoken: Arabic | | |
| Cultural Competency: N | | |
| Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR | | |
| Medi-Cal Open Panel: Yes | | |
| Min/Max Age: 0\999 | | |
| American Sign Language (ASL): N | | |
| Accessibility: CONTACT PROVIDER | | |
| Hours: M-F 8:00AM-5:00PM | | |
| Website: N/A | | |

| SURGERY GENERAL | | |
| AL-NOURI, OMAR | | |
| Provider ID: 211905 | | |
| Board Certified Specialty: No | | |
| 9300 CAMPUS POINT DR | | |
| LA JOLLA, CA 92037 | | |
| Phone: (800) 926-8273 | | |
| After Hours Phone: (800) 926-8273 | | |
| Provider Gender: Male | | |
| NPI: 1770742264 | | |
| Provider English Spoken: Y | | |

1819
D3. 専業提供者目錄

- Provider Language(s)
  - Spoken: Arabic
  - Cultural Competency: N
- Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM
- Website: N/A

SURGERY GENERAL
CLARY, BRYAN
Provider ID: 202568
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982787131
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM
- Website: N/A

SURGERY GENERAL
ARMANI, AVA
Provider ID: 282142
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92093
Phone: (858) 822-6100
After Hours Phone: (858) 822-6100
Provider Gender: Female
NPI: 1861759383
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM
- Website: N/A

SURGERY GENERAL
JACOBSEN, GARTH
Provider ID: 201728
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (619) 471-0755
After Hours Phone: (619) 471-0755
Provider Gender: Male
NPI: 1265649966
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM
- Website: N/A
D3. Provider Directory

PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

Surgery General
Santorelli, Jarrett
Provider ID: 272304
Board Certified Specialty: No
9300 Campus Point Dr
La Jolla, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497936900
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Surgery General
Vascular
Gaffey, Ann
Provider ID: 287012
Board Certified Specialty: No
9300 Campus Point Dr
La Jolla, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1316232010
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Surgery General
Vascular
Barleben, Andrew
Provider ID: 275371
Board Certified Specialty: Yes
9400 Campus Point Dr
La Jolla, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497936900
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Surgery General
Vascular
Howe, Steven
Provider ID: 206760
Board Certified Specialty: No
9434 Medical Center Dr FL 1
La Jolla, CA 92037
Phone: (858) 657-7777
D3. 專業提供者目錄

Fax: (858) 657-5058  
Provider Gender: Male  
NPI: 1497702740  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
THORNTON, SCRIPPS MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

SURGERY NEUROLOGICAL  
BEAUMONT, THOMAS  
Provider ID: 214126  
Board Certified Specialty: No  
3855 HEALTH SCIENCES DR  
LA JOLLA, CA 92093  
Phone: (858) 657-8540  
After Hours Phone: (858) 657-8540  
Provider Gender: Male  
NPI: 1497067573  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
THORNTON JOHN SALLY  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

SURGERY NEUROLOGICAL  
BARBA, DAVID  
Provider ID: 275678  
Board Certified Specialty: No  
9350 CAMPUS POINT DR STE 2A  
LA JOLLA, CA 92037  
Phone: (619) 543-5540  
Fax: (619) 287-7663  
After Hours Phone: (619) 543-5540  
Provider Gender: Male  
NPI: 1497067573  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
THORNTON JOHN SALLY  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

SURGERY NEUROLOGICAL  
BEN-HAIM, SHARONA  
Provider ID: 244070  
Board Certified Specialty: No  
9350 CAMPUS POINT DR LA JOLLA, CA 92037  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1942469663  
Provider English Spoken: Y  
Provider Language(s) Spoken: Hebrew, Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY  
THORNTON UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

SURGERY NEUROLOGICAL  
BLASKIEWICZ, DONALD  
Provider ID: 270282  
Board Certified Specialty: No  
9300 CAMPUS POINT DR LA JOLLA, CA 92037  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1215176839  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY
D3. 專業提供者目錄

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY NEUROLOGICAL
MARSHALL, LAWRENCE
Provider ID: 244149
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1710371273
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY NEUROLOGICAL
MURTHY, NIKHIL
Provider ID: 299995
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1710371273
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

SURGERY NEUROLOGICAL
OSORIO, JOSEPH
Provider ID: 242006
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1437416591
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL PHAM, MARTIN
Provider ID: 244159
Board Certified Specialty: No
9350 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1609130921
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC ANDRY, JAMES
Provider ID: 302085
Board Certified Specialty: No
9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Phone: (858) 824-1703
Fax: (858) 455-6473
After Hours Phone: (858) 824-1703
Provider Gender: Male
NPI: 1679726103
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC BLAIS, MICAH
Provider ID: 299944
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1972867562
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

HOSPITAL, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC

1824
D3. 專業提供者目錄

BLAIS, MICAH
Provider ID: 299945
Board Certified Specialty: No
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1972867562
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
CHIARAPPA, FRANK
Provider ID: 244460
Board Certified Specialty: No
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932536828
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC
BUKATA, SUSAN
Provider ID: 277947
Board Certified Specialty: No
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932140639
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC
CHOI, JIHOON
Provider ID: 284786
Board Certified Specialty: No
Phone: (800) 926-8273
Fax: (888) 539-8181
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285097741
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
### SURGERY ORTHOPEDIC

#### FLINT, JAMES

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<th>Provider ID:</th>
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<tr>
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<tr>
<td>9400 CAMPUS POINT DR LA JOLLA, CA 92093</td>
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</tr>
<tr>
<td>Phone:</td>
<td>(800) 926-8273</td>
</tr>
<tr>
<td>After Hours Phone:</td>
<td>(800) 926-8273</td>
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<tr>
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<tr>
<td>NPI:</td>
<td>1629239140</td>
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<td>Provider English Spoken:</td>
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<td>Cultural Competency:</td>
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<td>Hospital Affiliation:</td>
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<td>American Sign Language (ASL):</td>
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#### GOEB, YANNICK

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<tr>
<td>9400 CAMPUS POINT DR LA JOLLA, CA 92093</td>
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<tr>
<td>Phone:</td>
<td>(800) 926-8273</td>
</tr>
<tr>
<td>Fax:</td>
<td>(888) 539-8781</td>
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<tr>
<td>After Hours Phone:</td>
<td>(800) 926-8273</td>
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<td>Provider English Spoken:</td>
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<td>Cultural Competency:</td>
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<td>Hospital Affiliation:</td>
<td>UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</td>
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<td>Medi-Cal Open Panel:</td>
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#### KUSNEZOV, NICHOLAS

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<th>Provider ID:</th>
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<tr>
<td>Board Certified Specialty:</td>
<td>No</td>
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<tr>
<td>9834 GENESEE AVE STE 228 LA JOLLA, CA 92037</td>
<td></td>
</tr>
<tr>
<td>Phone:</td>
<td>(858) 455-9942</td>
</tr>
<tr>
<td>Fax:</td>
<td>(858) 455-6473</td>
</tr>
<tr>
<td>After Hours Phone:</td>
<td>(858) 455-9942</td>
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<td>Provider Gender:</td>
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<tr>
<td>NPI:</td>
<td>1396185161</td>
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<tr>
<td>Provider English Spoken:</td>
<td>Y</td>
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<td>Hospital Affiliation:</td>
<td>TWIN CITIES COMMUNITY HOSPITAL, PARADISE VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL</td>
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<td>American Sign Language (ASL):</td>
<td>N</td>
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</tbody>
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D3. 專業提供者目錄
8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC
PALLIA, CHRISTOPHER
Provider ID: 302103
Board Certified Specialty: No
9834 GENESEE AVE STE 228
LA JOLLA, CA 92037
Phone: (858) 455-9942
Fax: (858) 455-6473
After Hours Phone: (858) 455-9942
Provider Gender: Male
NPI: 1497751457
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA
THORNTON, UCSD MEDICAL CTR
Medit Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC
SULLIVAN, THOMAS
Provider ID: 285245
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1437565488
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA
THORNTON, UCSD MEDICAL CTR
Medit Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC
SULLIVAN, THOMAS
Provider ID: 285246
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407380512
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA
THORNTON, UCSD MEDICAL CTR
Medit Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
TAYLOR, MARIO
Provider ID: 299908
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407380512
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA
THORNTON, UCSD MEDICAL CTR
Medit Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
TAYLOR, MARIO
Provider ID: 299910
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
D3. 專業提供者目錄

NPI: 1407380512
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**SURGERY PLASTIC**

**HINCHCLIFF, KATHARINE**
Provider ID: 277289
Board Certified Specialty: No
- 9300 CAMPUS POINT DR
- LA JOLLA, CA 92037
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346674561
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**SURGERY THORACIC**

**BOYS, JOSHUA**
Provider ID: 243533
Board Certified Specialty: No
- 9300 CAMPUS POINT DR
- LA JOLLA, CA 92037
- Phone: (858) 657-7777
- After Hours Phone: (858) 657-7777
Provider Gender: Male
NPI: 1114368990
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**SURGERY THORACIC**

**GRAMINS, DANIEL**
Provider ID: 210047
Board Certified Specialty: Yes
- 9434 MEDICAL CENTER DR FL 1
- LA JOLLA, CA 92037
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1164495750
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**SURGERY THORACIC**

**KEARNS, MARK**
Provider ID: 274297
Board Certified Specialty: No
- 9434 MEDICAL CENTER DR FL 1
- LA JOLLA, CA 92037
- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982964276
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

1828
D3. Professional Providers Directory

Phone: (858) 647-8817
Fax: (858) 853-9878
After Hours Phone: (858) 647-8817
Provider Gender: Male
NPI: 1033683719
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY THORACIC

POLLEMA, TRAVIS
Provider ID: 210576
Board Certified Specialty: No
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871752956
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UNIVERSITY HSP OF SAN DIEGO CO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY THORACIC

Kearns, Mark
Provider ID: 274296
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-8817
Fax: (888) 539-8781
After Hours Phone: (858) 657-8817
Provider Gender: Male
NPI: 1033683719
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY THORACIC

Ramirez, Alfredo
Provider ID: 256390
Board Certified Specialty: No
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1003829417
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY THORACIC

Zander, Ashley
Provider ID: 291383
Board Certified Specialty: No
9434 MEDICAL CENTER DR FL 1
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780940031
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

**SURGERY THORACIC**

**ZANDER, ASHLEY**
Provider ID: 291382
Board Certified Specialty: No
3855 HEALTH SCIENCES DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780940031
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

**UROLOGY**

**CRAWFORD, ELWARD**
Provider ID: 244131
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 657-7876
Fax: (888) 539-8781
After Hours Phone: (858) 657-7876
Provider Gender: Male
NPI: 1902814379
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

**SURGERY THORACIC**

**ZANDER, ASHLEY**
Provider ID: 291381
Board Certified Specialty: No
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780940031
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

**UROLOGY**

**HSIEH, TUNG CHIN**
Provider ID: 294878
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 249-3534
After Hours Phone: (858) 249-3534
Provider Gender: Male
NPI: 1073758652
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
D3. 專業提供者目錄

UROLOGY
WANG, LUKE
Provider ID: 299934
Board Certified Specialty: No
9400 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033630173
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CARDIOVASCULAR DISEASE
KOTHA, PURUSHOTHAM
Provider ID: 32053
Board Certified Specialty: Yes
8860 CENTER DR STE 400
LA MESA, CA 91942
Phone: (619) 229-1995
Fax: (619) 229-1109
After Hours Phone: (619) 229-1995
Provider Gender: Male
NPI: 1093730814
Provider English Spoken: Y
Provider Language(s)
Spoken: Kannada, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL, SCIRPSS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCIRPSS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

hospital llc, grossmont hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE
REDDY, REDDIWANDLA
Provider ID: 265393
Board Certified Specialty: No
5565 GROSSMONT CENTER DR STE 202
LA MESA, CA 91942
Phone: (619) 461-6130
Fax: (619) 461-3108
After Hours Phone: (619) 461-6130
Provider Gender: Male
NPI: 1710996384
Provider English Spoken: Y
Provider Language(s)
Spoken: Bulgarian, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, ALVARADO COMMUNITY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCIRPSS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCIRPSS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE
SHEREV, DIMITRI
Provider ID: 290704
Board Certified Specialty: Yes
8851 CENTER DR STE 304
LA MESA, CA 91942
Phone: (619) 867-0557
Fax: (619) 867-0558
After Hours Phone: (619) 867-0557
Provider Gender: Male
NPI: 1154323996
Provider English Spoken: Y
Provider Language(s)
Spoken: Bulgarian, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, ALVARADO COMMUNITY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCIRPSS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, TRI CITY MEDICAL CTR, SCIRPSS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

LA MESA

CARDIOVASCULAR DISEASE
KOTHA, PURUSHOTHAM
Provider ID: 32053
Board Certified Specialty: Yes
8860 CENTER DR STE 400
LA MESA, CA 91942
Phone: (619) 229-1995
Fax: (619) 229-1109
After Hours Phone: (619) 229-1995
Provider Gender: Male
NPI: 1093730814
Provider English Spoken: Y
Provider Language(s)
Spoken: Kannada, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, SCIRPSS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A
D3. 專業提供者目錄

CERTIFIED NURSE
PRACTITIONER
LANE, KIMBERLY
Provider ID: 295955
Board Certified Specialty: No
8851 CENTER DR STE 501
LA MESA, CA 91942
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619) 697-2456
Provider Gender: Female
NPI: 1457670119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE
PRACTITIONER
RESTELLI, LYNDSEY
Provider ID: 217693
Board Certified Specialty: No
8881 FLETCHER PKWY STE 205
LA MESA, CA 91942
Phone: (619) 464-6434
After Hours Phone: (619) 464-6434
Provider Gender: Female
NPI: 1558854000
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

EMERGENCY MEDICINE
LOVEJOY, AMY
Provider ID: 206106
Board Certified Specialty: No
5565 GROSSMONT CENTER DR STE 2 STE 2
LA MESA, CA 91942
Phone: (619) 713-5379
Fax: (619) 713-5375
After Hours Phone: (619) 713-5375
Provider Gender: Female
NPI: 1790856557
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SANDIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
BELLOMO, THOMAS
Provider ID: 205600
Board Certified Specialty: No
5565 GROSSMONT CENTER DR STE 2 STE 2
LA MESA, CA 91942
Phone: (619) 713-5379
Fax: (619) 713-5375
After Hours Phone: (619) 713-5375
Provider Gender: Female
NPI: 1790856557
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SANDIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

EMERGENCY MEDICINE
QUINONES-PEREZ, BIANCA
Provider ID: 206948
Board Certified Specialty: No
5565 GROSSMONT CENTER DR STE 2 STE 2
LA MESA, CA 91942
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Female
NPI: 1124360565
 Provider English Spoken: Y
 Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEARING AID DEALER / SUPPLIER
ANDERSON, ELAINE
Provider ID: 268693
Board Certified Specialty: No
5565 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 589-5414
Fax: (619) 589-7391
After Hours Phone: (619) 589-5414
Provider Gender: Female
NPI: 1063558856
 Provider English Spoken: Y
 Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

HEMATOLOGY / ONCOLOGY
BATRA, REEMA
Provider ID: 295692
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 644-3030
Fax: (619) 644-3638
After Hours Phone: (619) 644-3030
Provider Gender: Female
NPI: 1629286505
 Provider English Spoken: Y
 Provider Language(s): Hindi, Mandarin
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A
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**HEMATOLOGY / ONCOLOGY**

MEDIC, IGOR
Provider ID: 295654
Board Certified Specialty: No
.Provider ID: 1154618593
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Serbian, Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
Website: N/A

ZU, KAI
Provider ID: 43199
Board Certified Specialty: No
.Provider ID: 1164583639
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
Website: N/A

MEDIC, IGOR
Provider ID: 119509
Board Certified Specialty: No
.Provider ID: 1164583639
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY
TAGHIZADEH, BEHZAD

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**Additional Information**

- The professional provider directory includes details such as provider ID, specialty, certification status, address, phone numbers, fax numbers, after-hours phone numbers, provider gender, NPI, English spoken languages, cultural competency, hospital affiliation, Medicare and Cal Open Panel status, age range, and accessibility.

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**Notes:**

- The text includes contact information for various healthcare providers, including names, IDs, specialties, and addresses.
- Each provider's details are listed with their corresponding contact information and other relevant data.

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**Contact Information:**

- Provider ID: 295654
- Provider ID: 1154618593
- Provider ID: 43199
- Provider ID: 295711
- Provider ID: 119509
- Provider ID: 1164583639

**Hospital Affiliation:**

- GROSSMONT HOSPITAL
- Sharp Grossmont Hospital

**Medi-Cal Open Panel:**

- Yes

**Min/Max Age:**

- 18\999
- 0\999

**Accessibility:**

- CONTACT PROVIDER
- N/A
D3. Professional Provider Directory

Provider ID: 269161
Board Certified Specialty: No
8851 CENTER DR STE 405
LA MESA, CA 91942
Phone: (619) 582-2404
Fax: (619) 582-2915
After Hours Phone: (619) 582-2404
Provider Gender: Male
NPI: 1275514986
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
USC Arcadia Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

YELLEN, LAURENCE
Provider ID: 269173
Board Certified Specialty: No
8851 CENTER DR STE 405
LA MESA, CA 91942
Phone: (619) 582-2404
Fax: (619) 582-2915
After Hours Phone: (619) 582-2404
Provider Gender: Female
NPI: 1477680551
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC,
USC Arcadia Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

ADAMI, REBECCA
Provider ID: 272676
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1992149447
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
RADY CHILDRENS HOSPITAL SAN DIEGO,
SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS,
SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

MCCULLOUGH, DEIRDRE
Provider ID: 244873
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1639153018
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

MELBER, DORA
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<th>Address</th>
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<td>296997</td>
<td>No</td>
<td>8851 CENTER DR STE 201</td>
<td>(858) 966-6710</td>
<td>(858) 966-6711</td>
<td>(858) 966-6710</td>
<td>Female</td>
<td>1124413026</td>
<td>Yes</td>
<td>N</td>
<td>UCSD LA JOLLA JOHN SALLY</td>
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<td>294654</td>
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<td>5555 GROSSMONT CENTER DR</td>
<td>(858) 966-6710</td>
<td>(858) 966-6711</td>
<td>(858) 966-6710</td>
<td>Female</td>
<td>1801207634</td>
<td>Yes</td>
<td>N</td>
<td>UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO</td>
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<td>294656</td>
<td>No</td>
<td>8851 CENTER DR STE 201</td>
<td>(858) 966-6710</td>
<td>(858) 966-6711</td>
<td>(858) 966-6710</td>
<td>Male</td>
<td>1154305977</td>
<td>Yes</td>
<td>N</td>
<td>UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital</td>
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<td>CONTACT PROVIDER</td>
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<td>M-F 8:00AM-5:00PM</td>
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**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**

Provider ID: 294656
Board Certified Specialty: No
Address: 8851 CENTER DR STE 201
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**MATERNAL AND FETAL MEDICINE**

**REIMERS, REBECCA**

Provider ID: 294656
Board Certified Specialty: No
Address: 8851 CENTER DR STE 201
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**MATERNAL AND FETAL MEDICINE**

**SCHWENDEMANN, WADE**

Provider ID: 277305
Board Certified Specialty: No
Address: 5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORN, TRI CITY MEDICAL CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEPHROLOGY
LEININGER, DANIEL
Provider ID: 295640
Board Certified Specialty: No
8851 CENTER DR STE 505
LA MESA, CA 91942
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619) 461-3880
Provider Gender: Male
NPI: 1164956264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, ALVARADO COMMUNITY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
WILLIAMS, KRISTIN
Provider ID: 277384
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1992847131
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORN, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEPHROLOGY
LEININGER, DANIEL
Provider ID: 293480
Board Certified Specialty: No
8851 CENTER DR STE 505
LA MESA, CA 91942
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619) 461-3880
Provider Gender: Male
NPI: 1164956264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, ALVARADO COMMUNITY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
### NEUROLOGY

**MOHAMMAD, AHMAD SHAH**  
Provider ID: 39868  
Board Certified Specialty: No  
8851 CENTER DR STE 307  
LA MESA, CA 91942  
Phone: (619) 465-2020  
Fax: (619) 698-1189  
After Hours Phone: (619) 337-7900  
Provider Gender: Male  
NPI: 1902973472  
Provider English Spoken: Y  
Provider Language(s) Spoken: Arabic, Farsi, French, German, Pushto, Spanish  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, CHULA VISTA, SCRIPPS MERCY HOSPITAL, SHARP CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
9:00AM-5:00PM  
Website: N/A

### OPHTHALMOLOGY

**CHIU, STEPHAN**  
Provider ID: 297585  
Board Certified Specialty: No  
5565 GROSSMONT CENTER DR STE 551  
LA MESA, CA 91942  
Phone: (619) 465-2020  
Fax: (619) 698-1189  
After Hours Phone: (619) 465-2020  
Provider Gender: Male  
NPI: 1053846956  
Provider English Spoken: Y  
Provider Language(s) Spoken: Mandarin, Spanish  
Cultural Competency: N  
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, SCRIPPS MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-4:00PM  
TU-W 8:30AM-4:00PM  
TH 8:00AM-4:00PM  
F 8:00AM-0:00PM  
Website: N/A

**HAIGHT, BRUCE**  
Provider ID: 269112  
Board Certified Specialty: No  
5565 GROSSMONT CENTER DR BLDG 3 STE 551  
LA MESA, CA 91942  
Phone: (800) 898-2020  
Fax: (844) 897-3788  
After Hours Phone: (800) 898-2020  
Provider Gender: Male  
NPI: 1427029628  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM
D3. 專業提供者目錄

OPHTHALMOLOGY
HAIGHT, BRUCE
Provider ID: 295984
Board Certified Specialty: No
5565 GROSSMONT CENTER DR STE 2-3
LA MESA, CA 91942
Phone: (619) 463-0331
Fax: (619) 463-0138
After Hours Phone: (619) 463-0331
Provider Gender: Male
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
HAIGHT, BRUCE
Provider ID: 288660
Board Certified Specialty: No
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Provider Gender: Male
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
HUDSON, HENRY
Provider ID: 297578
Board Certified Specialty: No
5565 GROSSMONT CENTER DR STE 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Provider Gender: Male
NPI: 1851349195
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, TRICITY MEDICAL CTR, RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

**OPTOMETRIST**

**AOTO, KIM**
Provider ID: 288652
Board Certified Specialty: No
7339 EL CAJON BLVD STE J AND K
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Provider Gender: Female
NPI: 1780935650
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**OTOLARYNGOLOGY**

**SAEZ, NEIL**
Provider ID: 302431
Board Certified Specialty: No
5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider Gender: Male
NPI: 1285014498
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**OTOLARYNGOLOGY**

**MOSHTAGHI, OMID**
Provider ID: 302380
Board Certified Specialty: No
5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Phone: (619) 464-3353
Fax: (619) 464-6720
After Hours Phone: (619) 464-3353
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**PEDIATRIC EMERGENCY MEDICINE**

**BETTY, MARYANN**
Provider ID: 245753
Board Certified Specialty: No
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
Phone: (619) 713-5375
Fax: (619) 713-5379
After Hours Phone: (619) 713-5375
Provider Gender: Female
NPI: 1285014498
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**PEDIATRIC EMERGENCY MEDICINE**

**GROSS, MATTHEW**
Provider ID: 297177
Board Certified Specialty: No
5565 GROSSMONT CENTER DR STE 2 STE 2
LA MESA, CA 91942
D3. 專業提供者目錄

**Provider ID: 262233**

**Provider Name:** JOSHI, WEENA

**Board Certified Specialty:** No

**Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR

**Open Panel:** Yes

**Min/Max Age:** 0-19

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

**Accessibility:** CONTACT PROVIDER

**Hours:** M-F 8:00AM-5:00PM

**Website:** N/A

**Provider ID:** 205335

**Provider Name:** MINKA, GENEVIEVE

**Board Certified Specialty:** No

**Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA

**Open Panel:** Yes

**Min/Max Age:** 0-19

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

**Accessibility:** CONTACT PROVIDER

**Hours:** M-F 8:00AM-5:00PM

**Website:** N/A

**Provider ID:** 205786

**Provider Name:** PARKER, SHERINE

**Board Certified Specialty:** No

**Affiliation:** VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

**Open Panel:** Yes

**Min/Max Age:** 0-19

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

**Accessibility:** CONTACT PROVIDER

**Hours:** M-F 8:00AM-5:00PM

**Website:** N/A

**Provider ID:** 241925

**Provider Name:** OZAKI, YOSHIHIRO

**Board Certified Specialty:** No

**Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO

**Open Panel:** Yes

**Min/Max Age:** 0-19

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

**Accessibility:** CONTACT PROVIDER

**Hours:** M-F 8:00AM-5:00PM

**Website:** N/A
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<th>Provider ID</th>
<th>Provider Name</th>
<th>Specialty</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
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<tr>
<td>265955</td>
<td>VARGAS, JACLYN</td>
<td>Pediatrics</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
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<td>278807</td>
<td>CLAY, CORRIE</td>
<td>Pediatrics</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
<td>0\19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
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<td>301590</td>
<td>DOUGHERTY, CLARA</td>
<td>Physicians Assistant</td>
<td>Sharp Memorial Hospital</td>
<td>Yes</td>
<td>0\18</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>N/A</td>
</tr>
</tbody>
</table>
D3. 專業提供者目錄

LA MESA, CA 91942
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619) 697-2456
Provider Gender: Female
NPI: 1609987619
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
ELO, KRISTIN
Provider ID: 241862
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 644-3030
Fax: (619) 644-3083
After Hours Phone: (619) 644-3030
Provider Gender: Female
NPI: 1164664306
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital,
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
FERRARA, SAMANTHA
Provider ID: 306005
Board Certified Specialty: No
7339 EL CAJON BLVD STE 1
LA MESA, CA 91942
Phone: (619) 698-0606
Fax: (619) 698-0609
After Hours Phone: (619) 698-0606
Provider Gender: Female
NPI: 1437822434
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM
Website: N/A

PHYSICIANS ASSISTANT
HINKLE, CORINNE
Provider ID: 305425
Board Certified Specialty: No
7339 EL CAJON BLVD STE 1
LA MESA, CA 91942
Phone: (619) 698-0606
Fax: (619) 698-0609
After Hours Phone: (619) 698-0606
Provider Gender: Female
NPI: 1508451949
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Valleywise Health Medical Center
Medi-Cal Open Panel: Yes
D3. 專業提供者目錄

Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
RAYMOND, ALAIN
Provider ID: 269057
Board Certified Specialty: No
8851 CENTER DR STE 505
LA MESA, CA 91942
Phone: (619) 461-3880
Fax: (619) 461-3895
After Hours Phone: (619) 461-3880
Provider Gender: Male
NPI: 1164729125
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
WHITE, KYLE
Provider ID: 302382
Board Certified Specialty: No
5565 GROSSMONT CENTER DR BLDG 3 STE 101
LA MESA, CA 91942
Phone: (619) 464-3353
Fax: (619) 464-7509
After Hours Phone: (619) 464-3353
Provider Gender: Male
NPI: 1922768860
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
VAWTER, ERIN
Provider ID: 295755
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 644-3030
Fax: (619) 644-3638
Provider Gender: Female
NPI: 1376988691
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIATION ONCOLOGY
CARMONA, RUBEN
Provider ID: 303099
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 740-4500
Fax: (619) 740-4899
After Hours Phone: (619) 740-4500
Provider Gender: Male
NPI: 1275929242
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIATION ONCOLOGY
COLEMAN, LORI
Provider ID: 221089
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 740-4500
Fax: (619) 740-8499
After Hours Phone: (619) 740-4500
D3. 專業提供者目錄

740-4500
Provider Gender: Female
NPI: 1053348920
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

RADIATION ONCOLOGY
VOLPP, PAUL
Provider ID: 221104
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 740-4500
Fax: (619) 740-8499
After Hours Phone: (619) 740-4500
Provider Gender: Male
NPI: 1225186232
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
MEMORIAL HOSPITAL, SHARP
CHULA VISTA MED CTR, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

RADIATION ONCOLOGY
WEINSTEIN, GEOFFREY
Provider ID: 220040
Board Certified Specialty: No
5555 GROSSMONT CENTER DR
LA MESA, CA 91942
Phone: (619) 740-4500
Fax: (619) 740-8499
After Hours Phone: (619) 740-4500
Provider Gender: Male
NPI: 1841233947
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
MOORE, BRIAN
Provider ID: 243960
Board Certified Specialty: No
8860 CENTER DR STE 100
LA MESA, CA 91942
Phone: (619) 460-2770
Fax: (619) 460-2774
After Hours Phone: (619) 460-2770
Provider Gender: Male
NPI: 1831144005
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
MOORE, BRIAN
Provider ID: 243959
Board Certified Specialty: No
8881 FLETCHER PKWY STE 102
LA MESA, CA 91942
Phone: (619) 460-2770
Fax: (619) 460-2774
After Hours Phone: (619) 460-2770
Provider Gender: Male
NPI: 1831144005
Provider English Spoken: Y
D3. Professional Provider Directory

Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
📍 Accessibility: CONTACT PROVIDER
⏰ Hours: M-F
7:00AM-5:00PM
🌐 Website: N/A

RADIOLOGY DIAGNOSTIC
VENKATESH, VIJAY
Provider ID: 269659
Board Certified Specialty: No
📍 8860 CENTER DR STE 100
LA MESA, CA 91942
Phone: (619) 460-2770
Fax: (619) 460-2774
📍 After Hours Phone: (619) 460-2770
Provider Gender: Male
NPI: 1689627085
📍 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
📍 Accessibility: CONTACT PROVIDER
⏰ Hours: M-F
8:00AM-5:00PM
🌐 Website: N/A

SURGERY ORTHOPEDIC
BALLARD, BROOKE
Provider ID: 262205
Board Certified Specialty: No
📍 8860 CENTER DR STE 350
LA MESA, CA 91942
Phone: (619) 286-9480
Fax: (619) 286-4568
📍 After Hours Phone: (619) 286-9480
Provider Gender: Female
NPI: 1841447950
📍 Provider English Spoken: Y
📍 Provider Language(s)
  Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: ALVARADO HOSPITAL LLC, SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
📍 Accessibility: CONTACT PROVIDER
⏰ Hours: M-F
9:00AM-5:00PM
🌐 Website: N/A
D3. 專業提供者目錄

Email:
tracy@alvaradoortho.com

UROLOGY
SALMASI, AMIRALI
Provider ID: 129643
Board Certified Specialty: No
8851 CENTER DR STE 501
LA MESA, CA 91942
Phone: (619) 697-2456
Fax: (858) 429-7930
After Hours Phone: (619) 697-2456
Provider Gender: Male
NPI: 1215008552
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
SOUTHWEST HEALTHCARE
RANCHO SPRINGS HOSPITAL,
SHARP MEMORIAL HOSPITAL,
POMONA VALLEY HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
MORA, WENDY
Provider ID: 290239
Board Certified Specialty: No
30195 FRASER DR
LAKE ELSINORE, CA 92530
Phone: (951) 252-2720
Fax: (760) 414-3892
After Hours Phone: (951) 252-2720
Provider Gender: Female
NPI: 1376958389
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
TAM, EMILY
Provider ID: 290319
Board Certified Specialty: No
30195 FRASER DR
LAKE ELSINORE, CA 92530
Phone: (951) 252-2720
Fax: (760) 414-3892
After Hours Phone: (951) 252-2720
Provider Gender: Female
NPI: 1336589332
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
FRANCIS, LARRY
Provider ID: 290293
Board Certified Specialty: No
30195 FRASER DR
LAKE ELSINORE, CA 92530
Phone: (951) 252-2720
Fax: (760) 414-3892
After Hours Phone: (951) 252-2720
Provider Gender: Female
NPI: 1336589332
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL MEDICAL CENTER-FRESNO,
CALIFORNIA PACIFIC MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

LAKE ELSINORE

OPTOMETRIST
GEE, JENNIFER
Provider ID: 290211
Board Certified Specialty: No
30195 FRASER DR
LAKE ELSINORE, CA 92530
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1336589332
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
TAM, EMILY
Provider ID: 290319
Board Certified Specialty: No
30195 FRASER DR
LAKE ELSINORE, CA 92530
Phone: (951) 252-2720
Fax: (760) 414-3892
After Hours Phone: (951) 252-2720
Provider Gender: Female
NPI: 1336589332
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

Phone: (951) 525-2720
Fax: (760) 414-3892
After Hours Phone: (951) 525-2720
Provider Gender: Female
NPI: 1497161236
Provider English Spoken: Y
Provider Language(s):
Spoken: Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CHIROPRACTOR
FULKS, ZACKARY
Provider ID: 301145
Board Certified Specialty: No
10039 VINE ST
LAKESIDE, CA 92040
Phone: (619) 390-9975
Fax: (360) 462-2744
After Hours Phone: (619) 390-9975
Provider Gender: Male
NPI: 1407562531
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CHIROPRACTOR
HOURIHAN, KEITH
Provider ID: 257549
Board Certified Specialty: No
10039 VINE ST
LAKESIDE, CA 92040
Phone: (619) 390-9975
Fax: (858) 633-4690
After Hours Phone: (619) 390-9975
Provider Gender: Male
NPI: 1306916994
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CHIROPRACTOR
MCCOWN, BARRY
Provider ID: 303816
Board Certified Specialty: No
10039 VINE ST
LAKESIDE, CA 92040
Phone: (619) 390-9975
Fax: (360) 462-2744
Provider Gender: Male
NPI: 1407562531
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D3. 產業提供者目錄

- **Provider ID:** 290407
  - Board Certified Specialty: No
  - Address: 10039 VINE ST
  - Lakeside, CA 92040
  - Phone: (619) 390-9975
  - Fax: (858) 633-4690
  - After Hours Phone: (619) 390-9975
  - Provider Gender: Female
  - NPI: 1023250453
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
  - Website: N/A

**Chiropractor**

- **MCCOWN, BARRY**
  - Provider ID: 301344
  - Board Certified Specialty: No
  - Address: 10039 VINE ST
  - Lakeside, CA 92040
  - Phone: (619) 390-9975
  - Fax: (360) 462-2744
  - After Hours Phone: (619) 390-9975
  - Provider Gender: Male
  - NPI: 1487781035
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
  - Website: N/A

**Physicians Assistant**

- **SMITH, KELLI**
  - Provider ID: 272954
  - Board Certified Specialty: No
  - Address: 30420 HAUN RD
  - Menifee, CA 92584
  - Phone: (951) 676-4193
  - After Hours Phone: (951) 676-4193
  - Provider Gender: Female
  - NPI: 1841771664
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
  - Website: N/A

**Psychologist**

- **BRUNETTO, HEIDI**
  - Provider ID: 290407
  - Board Certified Specialty: No
  - Address: 10039 VINE ST
  - Lakeside, CA 92040
  - Phone: (619) 390-9975
  - Fax: (858) 633-4690
  - After Hours Phone: (619) 390-9975
  - Provider Gender: Female
  - NPI: 1023250453
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
  - Website: N/A

**ANESTHESIOLOGY**

- **HYLTON, DIANA**
  - Provider ID: 241738
  - Board Certified Specialty: No
  - Address: 25500 MEDICAL CENTER DR
  - Murrieta, CA 92562
  - Phone: (800) 926-8273
  - After Hours Phone: (800) 926-8273
  - Provider Gender: Female
  - NPI: 1932527751
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: UCSD LA Jolla John Sally Thornton, UCSD Medical CTR, Southwest Healthcare Inland Valley Hospital, Southwest Healthcare Rancho Springs Hospital
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
  - Website: N/A

- **KRAUSE, MARTIN**
  - Provider ID: 287655
D3. 專業提供者目錄

Board Certified Specialty: No
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6000
Fax: (951) 677-9757
After Hours Phone: (951) 696-6000
Provider Gender: Male
NPI: 1417243239
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
KLEMENCIC, TAHNEE
Provider ID: 302627
Board Certified Specialty: No
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1134802283
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
SNYDER, MICHELLE
Provider ID: 210676
Board Certified Specialty: No
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851561054
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
LI, JINGHONG
Provider ID: 255941
Board Certified Specialty: No
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6000
After Hours Phone: (951) 696-6000
Provider Gender: Female
NPI: 1619014479
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY
AL KHIAMI, BELAL
Provider ID: 275994
Board Certified Specialty: No
28062 BAXTER RD
MURRIETA, CA 92563
Phone: (951) 290-4000
Fax: (888) 539-8781
After Hours Phone: (951) 290-4000
Provider Gender: Male
NPI: 1063701068
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR MURRIETA, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
STEVenson, REHEIA
Provider ID: 210794
Board Certified Specialty: No
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346696044
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY
WETTERSTEN, NICHOLAS
Provider ID: 210605
Board Certified Specialty: No
41011 CALIFORNIA OAKS RD STE 104
MURRIETA, CA 92562
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1063701068
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
MELBER, DORA
Provider ID: 296988
Board Certified Specialty: No
25170 HANCOCK AVE FL 1 MURRIETA, CA 92562
Phone: (858) 966-6710 Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
REIMERS, REBECCA
Provider ID: 294652
Board Certified Specialty: No
25500 MEDICAL CENTER DR MURRIETA, CA 92562
Phone: (858) 966-6710 Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
REIMERS, REBECCA
Provider ID: 294649
Board Certified Specialty: No
25170 HANCOCK AVE FL 1 MURRIETA, CA 92562
Phone: (858) 966-6710 Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
D3. 專業提供者目錄

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
NYMAN, KATHERINE
Provider ID: 301820
Board Certified Specialty: No
Provider ID: 264676
Board Certified Specialty: Yes
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6000
Fax: (951) 696-6105
After Hours Phone: (951) 696-6000
Provider Gender: Female
NPI: 1003260951
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

WEISS, KATHERINE
Provider ID: 264676
Board Certified Specialty: Yes
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6000
Fax: (951) 696-6105
After Hours Phone: (951) 696-6000
Provider Gender: Female
NPI: 1053541862
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

WEST, JULIE
Provider ID: 297071
Board Certified Specialty: No
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6000
Fax: (951) 696-6105
After Hours Phone: (951) 696-6000
Provider Gender: Female
NPI: 1811151848
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

NEUROLOGY
GOLD, JEFFREY
Provider ID: 283334
Board Certified Specialty: No
Provider ID: 283334
Board Certified Specialty: No
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1568773984
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

1853
D3. 專業提供者目錄

NEUROLOGY
JINDAL, ANUJA
Provider ID: 215521
Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1194046581
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEUROLOGY CHILD
GOLD, JEFFREY
Provider ID: 215691
Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1568773984
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEUROLOGY
SAHAGIAN, MICHELLE
Provider ID: 283166
Board Certified Specialty: No

25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1275604035
Provider English Spoken: Y
Cultural Competency: N

NEUROLOGY CHILD
GUIDO-ESTRADA, NATALIE
Provider ID: 215442
Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1528353521
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEUROLOGY CHILD
KIM MCMANUS, OLIVIA
Provider ID: 215666
Board Certified Specialty: No

25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1174870067
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA IRVINE MED CTR, CHILDRENS HOSPITAL OF ORANGE COUNTY, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
BANSAL, PREETI
Provider ID: 215606
Board Certified Specialty: No
Provider Gender: Female
NPI: 1174758031
Provider English Spoken: Y
Website: N/A

OPHTHALMOLOGY
BHATIA, SHAGUN
Provider ID: 267317
Board Certified Specialty: No
Provider Gender: Female
NPI: 1104237353
Provider English Spoken: Y
Website: N/A

OBSTETRICS / GYNECOLOGY
BINDER, PRATIBHA
Provider ID: 273227
Board Certified Specialty: No
Provider Gender: Female
NPI: 1174758031
Provider English Spoken: N
Website: N/A

BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

HENNEIN, LAUREN
Provider ID: 297010
Board Certified Specialty: No
Provider Gender: Female
NPI: 1699216010
Provider English Spoken: N
Website: N/A

BHATIA, SHAGUN
Provider ID: 267317
Board Certified Specialty: No
Provider Gender: Female
NPI: 1174758031
Provider English Spoken: N
Website: N/A

HENNEIN, LAUREN
Provider ID: 297010
Board Certified Specialty: No
Provider Gender: Female
NPI: 1699216010
Provider English Spoken: N
Website: N/A
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<th>Specialty</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Gender</th>
<th>NPI</th>
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<th>Medi-Cal Open Panel</th>
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<th>American Sign Language (ASL)</th>
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<tbody>
<tr>
<td>OPHTHALMOLOGY</td>
<td>MOVAGHAR, MANSOOR</td>
<td>216415</td>
<td></td>
<td>25170 HANCOCK AVE FL 1 MURRIETA, CA 92562</td>
<td>(858) 309-7702</td>
<td>Male</td>
<td>1497792220</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
<td>0\19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>8:00AM-5:00PM</td>
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<tr>
<td>OPHTHALMOLOGY</td>
<td>OHALLORAN, HENRY</td>
<td>215685</td>
<td></td>
<td>25170 HANCOCK AVE MURRIETA, CA 92562</td>
<td>(951) 600-1640</td>
<td>Male</td>
<td>1235287947</td>
<td>Scripps Mercy Hospital, Grossmont Hospital, Scripps Mercy Hospital Chula Vista</td>
<td>Yes</td>
<td>0\19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>8:00AM-5:00PM</td>
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<tr>
<td>OTOLARYNGOLOGY</td>
<td>BLISS, MORGAN</td>
<td>215684</td>
<td></td>
<td>25170 HANCOCK AVE MURRIETA, CA 92562</td>
<td>(951) 600-1640</td>
<td>Female</td>
<td>1760707657</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
<td>0\19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>8:00AM-5:00PM</td>
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<tr>
<td>OTOLARYNGOLOGY</td>
<td>CARVALHO, DANIELA</td>
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</tbody>
</table>

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
<table>
<thead>
<tr>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Provider Gender</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Provider Language(s)</th>
<th>Cultural Competency</th>
<th>Hospital Affiliation</th>
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<tbody>
<tr>
<td>215332</td>
<td>No</td>
<td>25170 HANCOCK AVE MURRIETA, CA 92562</td>
<td>(951) 600-1640</td>
<td>(951) 600-1640</td>
<td>Female</td>
<td>1154492916</td>
<td>Y</td>
<td>French, Spanish</td>
<td>N</td>
<td>Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Sharp Memorial Hospital</td>
</tr>
<tr>
<td>244898</td>
<td>No</td>
<td>25170 HANCOCK AVE MURRIETA, CA 92562</td>
<td>(951) 600-1400</td>
<td>(951) 600-1400</td>
<td>Female</td>
<td>1952740177</td>
<td>Y</td>
<td>French, Spanish</td>
<td>N</td>
<td>Rady Childrens Hospital San Diego, Scripps Memorial Hospital</td>
</tr>
<tr>
<td>215564</td>
<td>No</td>
<td>25170 HANCOCK AVE MURRIETA, CA 92562</td>
<td>(951) 600-1640</td>
<td>(951) 600-1640</td>
<td>Female</td>
<td>1659305753</td>
<td>Y</td>
<td>Mandarin</td>
<td>N</td>
<td>Rady Childrens Hospital San Diego</td>
</tr>
<tr>
<td>254089</td>
<td>No</td>
<td>25170 HANCOCK AVE MURRIETA, CA 92562</td>
<td>(951) 600-1640</td>
<td>(951) 600-1640</td>
<td>Female</td>
<td>1780860536</td>
<td>Y</td>
<td>Mandarin</td>
<td>N</td>
<td>Childrens Hosp of Los Angeles, Pih Health Hospital - Whittier, Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr, Rady Childrens Hospital San Diego</td>
</tr>
<tr>
<td>254296</td>
<td>No</td>
<td>25170 HANCOCK AVE FL 1 MURRIETA, CA 92562</td>
<td>(951) 600-1640</td>
<td>(951) 600-1640</td>
<td>Female</td>
<td>1780860536</td>
<td>Y</td>
<td>Mandarin</td>
<td>N</td>
<td>Rady Childrens Hospital San Diego</td>
</tr>
</tbody>
</table>

**OTOLARYNGOLOGY**

**FRIESEN, TZYYNONG**

Provider ID: 244898  
Board Certified Specialty: No  
Address: 25170 HANCOCK AVE MURRIETA, CA 92562  
Phone: (951) 600-1400  
After Hours Phone: (951) 600-1400  
Provider Gender: Female  
NPI: 1952740177  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**OTOLARYNGOLOGY**

**KARI, ELINA**

Provider ID: 254089  
Board Certified Specialty: No  
Address: 25170 HANCOCK AVE MURRIETA, CA 92562  
Phone: (951) 600-1640  
After Hours Phone: (951) 600-1640  
Provider Gender: Female  
NPI: 1780860536  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Childrens Hosp of Los Angeles
D3. 專業提供者目錄

ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, Rady CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY
COLLINS, CATHLEEN
Provider ID: 215733
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1205128089
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LUCILE SALTER PACKARD CHILDREN'S HOSP, Stanford Health Care, Rady CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
PATEL, VIJAY
Provider ID: 297034
Board Certified Specialty: No
25170 HANCOCK AVE STE 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1508250747
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, VALLEY CHILDREN'S HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC CARDIOLOGY
DAVIS, CHRISTOPHER
Provider ID: 215743
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1760691950
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes

BORQUEZ, ALEJANDRO
Provider ID: 284119
Board Certified Specialty: No
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1114277787
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC CARDIOLOGY
DUMMER, KIRSTEN
Provider ID: 215645
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1487821815
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSF Benioff Children's Hospital Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC CARDIOLOGY
MCCANDLESS, RACHEL
Provider ID: 215601
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1780642280
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC CARDIOLOGY
SAH, SERENA
Provider ID: 215643
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (858) 966-5855
After Hours Phone: (858) 966-5855
Provider Gender: Female
NPI: 1295042653
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC CARDIOLOGY
SILVA SEPULVEDA, JOSE
Provider ID: 215679
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
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<th>Location</th>
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<td>25500 MEDICAL CENTER DR MURRIETA, CA 92562</td>
<td>(858) 966-7800</td>
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<td>Website: N/A</td>
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<td>2366622078</td>
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<td>(858) 966-8231</td>
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<td>N</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
<td>Website: N/A</td>
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**PEDIATRIC EMERGENCY MEDICINE**

DEVERA, GEMMIE
Provider ID: N/A
Board Certified Specialty: No
25500 MEDICAL CENTER DR MURRIETA, CA 92562
(951) 696-6124
(951) 696-6124
Provider Gender: Female
NPI: 1366622078
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

GROSS, MATTHEW
Provider ID: 216969
Board Certified Specialty: No
25500 MEDICAL CENTER DR MURRIETA, CA 92562
(951) 696-6124
Provider Gender: Male
NPI: 1942223664
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD Medical Ctr, UCSF Benioff Children's Hospital Oakland
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

**PEDIATRIC EMERGENCY MEDICINE**

**INDRA, SEAN**
Provider ID: 302626
Board Certified Specialty: No
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Male
NPI: 1427349091
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Hospital Affiliation: Rady Children's Hospital San Diego, Valley Children's Hospital
Min/Max Age: 0\19
American Sign Language (ASL): N

**KINGDON, JOANNA**
Provider ID: 302318
Board Certified Specialty: No
25170 HANCOCK AVE STE 150
MURRIETA, CA 92562
Phone: (858) 966-7800
Fax: (858) 966-8231
After Hours Phone: (858) 966-7800
Provider Gender: Female
NPI: 1609495399
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

**MESIWALA, ADNAN**
Provider ID: 275655
Board Certified Specialty: No
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6105
After Hours Phone: (951) 696-6161
Provider Gender: Male
NPI: 1528483955
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Min/Max Age: 0\19
American Sign Language (ASL): N

**MILLS, DAVID**
Provider ID: 302147
Board Certified Specialty: No
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Male
NPI: 1194145946
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

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*您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad 。*
D3. 專業提供者目錄

OZCAN, ALI
Provider ID: 287924
Board Certified Specialty: No
Hospital Affiliation: Rady Children's Hospital San Diego, SouthWest Healthcare Rancho Springs Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
SCHROTER, STEPHANIE
Provider ID: 243831
Board Certified Specialty: No
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
RANASURIYA, DUNISHA
Provider ID: 216972
Board Certified Specialty: No
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
SHETH, SARIKA
Provider ID: 248172
Board Certified Specialty: No
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

1862
D3. 專業提供者目錄

Provider Gender: Female
NPI: 1336503234
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

MEDICINE
SYED-UDDIN, SUMIYAH
Provider ID: 297771
Board Certified Specialty: No
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Female
NPI: 1225606478
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
SOUDER, CHRISTOPHER
Provider ID: 301634
Board Certified Specialty: Yes
25170 HANCOCK AVE FL 1
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1851540199
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
SYED-UDDIN, SUMIYAH
Provider ID: 297771
Board Certified Specialty: No
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Female
NPI: 1225606478
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Urdu
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
TRAN, THERESA
Provider ID: 301835
Board Certified Specialty: No
25500 MEDICAL CENTER DR
MURRIETA, CA 92562
Phone: (951) 696-6124
Fax: (951) 696-6293
After Hours Phone: (951) 696-6124
Provider Gender: Female
NPI: 1417496985
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
### PEDIATRIC ENDOCRINOLOGY

**SINGH, PUJA**  
Provider ID: 302819  
Board Certified Specialty: No  
25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562  
Phone: (951) 600-1640  
Fax: (951) 600-1760  
After Hours Phone: (951) 600-1640  
Provider Gender: Female  
NPI: 1841721172  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish, Yue Chinese  
Cultural Competency: N  
Hospital Affiliation: Rady Children's Hospital San Diego  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

### PEDIATRIC PULMONOLOGY

**CHU, CHRISTOPHER**  
Provider ID: 301640  
Board Certified Specialty: No  
25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562  
Phone: (951) 600-1640  
Fax: (951) 600-1760  
After Hours Phone: (951) 600-1640  
Provider Gender: Male  
NPI: 1912369273  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish, Yue Chinese  
Cultural Competency: N  
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD Medical Ctr  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**RAO, APARNA**  
Provider ID: 294382  
Board Certified Specialty: No  
25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562  
Phone: (951) 600-1640  
Fax: (951) 600-1760  
After Hours Phone: (951) 600-1640  
Provider Gender: Female  
NPI: 1144615659  
Provider English Spoken: Y  
Provider Language(s) Spoken: Hindi  
Cultural Competency: N  
Hospital Affiliation: Rady Children's Hospital San Diego  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

### PEDIATRIC GASTROENTEROLOGY

**LOPEZ, XIMENA**  
Provider ID: 302857  
Board Certified Specialty: No  
25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562  
Phone: (951) 600-1640  
Fax: (951) 600-1760  
After Hours Phone: (951) 600-1640  
Provider Gender: Female  
NPI: 1649222340  
Provider English Spoken: Y  
Provider Language(s) Spoken: Hindi  
Cultural Competency: N  
Hospital Affiliation: Rady Children's Hospital San Diego  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1740316405
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDiatrics
NGO, MAI
Provider ID: 302112
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1508910787
Provider English Spoken: Y
Provider Language(s): Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, MEDICAL CTR AT UCSF, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDiatrics
VARGAS TRUJILLO, MARCELA
Provider ID: 215602
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1952534091
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
ALGRA, JEFFREY
Provider ID: 215644
Board Certified Specialty: No
25170 HANCOCK AVE
MURRIETA, CA 92562
Phone: (951) 600-1640
Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1457664518
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes

1865
D3. 專業提供者目錄

Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
BIFFL, SUSAN
Provider ID: 283113
Board Certified Specialty: No
25170 HANCOCK AVE MURRIETA, CA 92562
Phone: (951) 600-1640 Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1366589640
Provider English Spoken: Y Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
RYAN, KYLE
Provider ID: 275662
Board Certified Specialty: No
25170 HANCOCK AVE FL 1 MURRIETA, CA 92562
Phone: (951) 600-1640 Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Male
NPI: 1447645742
Provider English Spoken: Y Cultural Competency: N
Medi-Cal Open Panel: Yes

Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
DALAL, PRITHA
Provider ID: 215665

PHYSICAL MEDICINE / REHABILITATION
SCOTT-WYARD, PHOEBE
Provider ID: 283086
Board Certified Specialty: No
25170 HANCOCK AVE MURRIETA, CA 92562
Phone: (951) 600-1640 Fax: (951) 600-1760
After Hours Phone: (951) 600-1640
Provider Gender: Female
NPI: 1336356203
Provider English Spoken: Y Cultural Competency: N
Hospital Affiliation: Children's Hospital Of Los Angeles, Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
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<td>Male</td>
<td>1487635272</td>
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<td>25495 MEDICAL CENTER DR MURRIETA, CA 92562</td>
<td>(951) 304-7546</td>
<td>(951) 696-5872</td>
<td>(951) 304-7546</td>
<td>Female</td>
<td>1588602247</td>
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<td>No</td>
<td>25500 MEDICAL CENTER DR MURRIETA, CA 92562</td>
<td>(951) 677-1111</td>
<td>(951) 677-9757</td>
<td>(951) 677-1111</td>
<td>Male</td>
<td>1144615337</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
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**PHYSICIANS ASSISTANT**

**ANWAR, YASMIN**

Provider ID: 300014  
Board Certified Specialty: No  
Address: 25500 MEDICAL CENTER DR MURRIETA, CA 92562  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1750745394  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Sharp Memorial Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A  

**PHYSICIANS ASSISTANT**

**KIVIAT, ANNETTE**

Provider ID: 300845  
Board Certified Specialty: Yes  
Address: 25170 HANCOCK AVE FL 1 MURRIETA, CA 92562  
Phone: (951) 600-1640  
Fax: (951) 600-1760  
After Hours Phone: (951) 600-1640  
Provider Gender: Female  
NPI: 1205381845  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Sharp Memorial Hospital  
Medi-Cal Open Panel: No  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A  

**PULMONARY DISEASES**

**KUMAR, AVNEE**

Provider ID: 283350  
Board Certified Specialty: No  
Address: 25500 MEDICAL CENTER DR MURRIETA, CA 92562  
Phone: (951) 677-1111  
Fax: (951) 677-9757  
After Hours Phone: (951) 677-1111  
Provider Gender: Male  
NPI: 1144615337  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD Medical Ctr, UCSD La Jolla  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL):
D3. 專業提供者目錄

N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL
FAIRBANKS, TIMOTHY
Provider ID: 246979
Board Certified Specialty: No
 ⚪ 25170 HANCOCK AVE FL 1
 MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951) 600-1640
 Provider Gender: Male
 NPI: 1407010556
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Rady
 Children's Hospital San Diego, UCSD Medical Ctr,
 Sharp Mary Birch Hosp for Women and
 Newborns, National Naval Med Ctr,
 Sharp Memorial Hospital,
 Scripps Memorial Hospital, UCSF Benioff
 Children's Hospital Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

KLING, KAREN
Provider ID: 215583
Board Certified Specialty: No
 ⚪ 25170 HANCOCK AVE
 MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951) 600-1640
 Provider Gender: Female
 NPI: 1982775144
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Rady
 Children's Hospital San Diego, UCSD Medical Ctr,
 Sharp Mary Birch Hosp for Women and
 Newborns, National Naval Med Ctr,
 Sharp Memorial Hospital,
 Scripps Memorial Hospital, UCSF Benioff
 Children's Hospital Oakland
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY ORTHOPEDIC
CHENG, YU TSUN
Provider ID: 301902
Board Certified Specialty: No
 ⚪ 25170 HANCOCK AVE
 MURRIETA, CA 92562
 Phone: (951) 600-1640
 Fax: (951) 600-1760
 After Hours Phone: (951) 600-1640
 Provider Gender: Male
 NPI: 1992982854
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: Rady
 Children's Hospital San Diego, Southwest Healthcare Inland Valley Hospital,
 Southwest Healthcare Rancho Springs Hospital
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL
HOPE, STEVEN
Provider ID: 206761
Board Certified Specialty: No
 ⚪ 25170 HANCOCK AVE
 MURRIETA, CA 92562
 Phone: (951) 600-1640
 After Hours Phone: (951) 600-1640
 Provider Gender: Male
 NPI: 1497702740
 Provider English Spoken: Y
 Cultural Competency: N
D3. 專業提供者目錄

- **Surgery Orthopedic**
  - **Upasani, Vidyadhar**
    - Provider ID: 283160
    - Board Certified Specialty: No
    - Provider Gender: Male
    - NPI: 1548417652
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Hospital Affiliation: Rady Childrens Hospital San Diego
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\19
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-F
      - 8:00AM-5:00PM
    - Website: N/A
    - 25170 Hancock Ave FL 1
    - Murrieta, CA 92562
    - Phone: (951) 600-1640
    - Fax: (951) 600-1760
    - After Hours Phone: (951) 600-1640

- **Surgery Pediatric**
  - **Thangarajah, Hariharan**
    - Provider ID: 215420
    - Board Certified Specialty: No
    - Provider Gender: Male
    - NPI: 15987979593
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Hospital Affiliation: Tri City Medical Ctr, UCSD Medical Ctr
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-F
      - 8:00AM-5:00PM
    - Website: N/A
    - 25170 Hancock Ave
    - Murrieta, CA 92562
    - Phone: (951) 600-1640
    - After Hours Phone: (951) 600-1640

- **Surgery Thoracic**
  - **Howe, Steven**
    - Provider ID: 210169
    - Board Certified Specialty: No
    - Provider Gender: Male
    - NPI: 1497702740
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Hospital Affiliation: UCSD Medical Ctr, UCSD La Jolla
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-F
      - 8:00AM-5:00PM
    - Website: N/A
    - 41011 California Oaks Rd Ste 104
    - Murrieta, CA 92562
    - Phone: (800) 926-8273
    - Fax: (888) 539-8781
    - After Hours Phone: (800) 926-8273

- **Surgery Thoracic**
  - **Pollema, Travis**
    - Provider ID: 210577
    - Board Certified Specialty: No
    - Provider Gender: Male
    - 41011 California Oaks Rd Ste 104
    - Murrieta, CA 92562
    - Phone: (800) 926-8273
    - Fax: (888) 539-8781
    - After Hours Phone: (800) 926-8273
D3. 專業提供者目錄

NPI: 1871752956
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
DE CASTRO, SHARLENE
Provider ID: 299158
Board Certified Specialty: No
2743 HIGHLAND AVE NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 339-5657
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1750019824
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
DRISCOLL, SUSAN
Provider ID: 301774
Board Certified Specialty: No
340 E 8TH ST NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1477755684
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A

NATIONAL CITY

CERTIFIED NURSE PRACTITIONER
CUNNINGHAM, ISIS
Provider ID: 302115
Board Certified Specialty: No
655 EUCLID AVE STE 205 NATIONAL CITY, CA 91950
Phone: (619) 470-1945
Fax: (619) 475-5048
After Hours Phone: (619) 470-1945
Provider Gender: Female
NPI: 1770124927
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
DE CASTRO, SHARLENE
Provider ID: 299158
Board Certified Specialty: No
2743 HIGHLAND AVE NATIONAL CITY, CA 91950
Phone: (844) 200-2426
Fax: (619) 339-5657
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1750019824
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM
F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
DRISCOLL, SUSAN
Provider ID: 301775
Board Certified Specialty: No
330 E 8TH ST NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1477755684
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
DRISCOLL, SUSAN
Provider ID: 301774
Board Certified Specialty: No
340 E 8TH ST NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 259-2807
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1477755684
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A

1870
D3. 專業提供者目錄

CERTIFIED NURSE PRACTITIONER
GULLY, MICHELLE  
Provider ID: 299422  
Board Certified Specialty: No  
1428 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
Phone: (844) 200-2426  
Fax: (619) 434-1613  
After Hours Phone: (844) 200-2426  
Provider Gender: Female  
NPI: 1801557947  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

CERTIFIED NURSE PRACTITIONER
LIM, IMELDA  
Provider ID: 294308  
Board Certified Specialty: No  
2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
Phone: (844) 200-2426  
Fax: (619) 474-3919  
After Hours Phone: (844) 200-2426  
Provider Gender: Female  
NPI: 1093130395  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

CERTIFIED NURSE PRACTITIONER
NOVENO, HILARIO  
Provider ID: 297836  
Board Certified Specialty: No  
2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
Phone: (844) 200-2426  
Fax: (619) 474-4008  
After Hours Phone: (844) 200-2426  
Provider Gender: Male  
NPI: 1124486865  
Provider English Spoken: Y

PRACTITIONER
MIDORO, ABEGAILLE  
Provider ID: 303827  
Board Certified Specialty: No  
2835 HIGHLAND AVE STE B  
NATIONAL CITY, CA 91950  
Phone: (844) 200-2426  
Fax: (619) 477-2628  
After Hours Phone: (844) 200-2426  
Provider Gender: Female  
NPI: 1952925851  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:30AM-5:30PM  
Website: N/A

PRACTITIONER
MIDORO, ABEGAILLE  
Provider ID: 303830  
Board Certified Specialty: No  
2835 HIGHLAND AVE STE A  
NATIONAL CITY, CA 91950  
Phone: (844) 200-2426  
Fax: (619) 477-1286  
After Hours Phone: (844) 200-2426  
Provider Gender: Female  
NPI: 1952925851  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-TU  
8:30AM-5:30PM  
W 10:00AM-7:00PM  
TH-F 8:30AM-5:30PM  
Website: N/A

PRACTITIONER
NOVENO, HILARIO  
Provider ID: 297836  
Board Certified Specialty: No  
2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
Phone: (844) 200-2426  
Fax: (619) 474-4008  
After Hours Phone: (844) 200-2426  
Provider Gender: Male  
NPI: 1124486865  
Provider English Spoken: Y
### CHIROPRACTOR

<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Provider Gender</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Provider Language(s)</th>
<th>Accessibility</th>
<th>Hours</th>
<th>Website</th>
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<tbody>
<tr>
<td>GILIBERTO, JOSEPH</td>
<td>291548</td>
<td>No</td>
<td>2835 HIGHLAND AVE</td>
<td>(844) 200-2426</td>
<td>(619) 399-5959</td>
<td>(844) 200-2426</td>
<td>Male</td>
<td>1821463159</td>
<td>Y</td>
<td>Tagalog</td>
<td>CONTACT</td>
<td>M-F 8:00AM-6:00PM</td>
<td>N/A</td>
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<tr>
<td>DILLON, MAYRA</td>
<td>305287</td>
<td>No</td>
<td>1136 D AVE</td>
<td>(619) 662-4100</td>
<td>(619) 336-2323</td>
<td>(619) 662-4100</td>
<td>Female</td>
<td>1629232715</td>
<td>Y</td>
<td>Spanish</td>
<td>CONTACT</td>
<td>M-F 8:00AM-5:00PM</td>
<td>N/A</td>
</tr>
<tr>
<td>NAVARRO, VANESSA</td>
<td>301784</td>
<td>No</td>
<td>2400 E 8TH ST</td>
<td>(619) 662-4100</td>
<td>(619) 259-2807</td>
<td>(619) 662-4100</td>
<td>Female</td>
<td>1952563421</td>
<td>Y</td>
<td>Filipino, Spanish, Tagalog</td>
<td>CONTACT</td>
<td>M-F 8:00AM-5:00PM</td>
<td>N/A</td>
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### FAMILY PRACTICE

<table>
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<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Provider Gender</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Provider Language(s)</th>
<th>Accessibility</th>
<th>Hours</th>
<th>Website</th>
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</thead>
<tbody>
<tr>
<td>ROBERTS, POMAI</td>
<td>301278</td>
<td>No</td>
<td>1136 D AVE</td>
<td>(619) 662-4100</td>
<td>(619) 474-3722</td>
<td>(619) 662-4100</td>
<td>Female</td>
<td>1023278314</td>
<td>Y</td>
<td>Spanish</td>
<td>CONTACT</td>
<td>M-F 8:00AM-5:00PM</td>
<td>N/A</td>
</tr>
<tr>
<td>NAVARRO, VANESSA</td>
<td>301784</td>
<td>No</td>
<td>2400 E 8TH ST</td>
<td>(619) 662-4100</td>
<td>(619) 259-2807</td>
<td>(619) 662-4100</td>
<td>Female</td>
<td>1952563421</td>
<td>Y</td>
<td>Filipino, Spanish, Tagalog</td>
<td>CONTACT</td>
<td>M-F 8:00AM-5:00PM</td>
<td>N/A</td>
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</tbody>
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**Note:**
- Provider Language(s) Spoken: Tagalog
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-6:00PM
- Website: N/A

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**Your PCP's doctors' network may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from a mental health service provider, and then the service can be covered.**

For online access to mental health service providers, please visit blueshieldca.com/fad.
D3. 專業提供者目錄

Website: N/A

INTERVENTIONAL CARDIOLOGY
CAMACHO, BENJAMIN
Provider ID: 35045
Board Certified Specialty: No
1615 SWEETWATER RD
NATIONAL CITY, CA 91950
Phone: (619) 474-2233
Fax: (619) 474-2211
After Hours Phone: (619) 474-2233
Provider Gender: Male
NPI: 1699759936
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-6:00PM
Website: N/A
Email: BCAMACHOMD@SBCGLOBAL.NET

INTERVENTIONAL CARDIOLOGY
CAMACHO, BENJAMIN
Provider ID: 269129
Board Certified Specialty: No
1615 SWEETWATER RD
NATIONAL CITY, CA 91950
Phone: (619) 474-2233
Fax: (619) 474-2211
After Hours Phone: (619) 474-2233
Provider Gender: Male
NPI: 1699759936
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL,
ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A
Email: BCAMACHOMD@SBCGLOBAL.NET

INTERVENTIONAL CARDIOLOGY
DAMANI, SAMIR
Provider ID: 303098
Board Certified Specialty: No
655 EUCLID AVE STE 401
NATIONAL CITY, CA 91950
Phone: (858) 800-2480
Fax: (858) 216-1908
After Hours Phone: (858) 800-2480
Provider Gender: Male
NPI: 1457379372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
Email: BCAMACHOMD@SBCGLOBAL.NET
INTERVENTIONAL CARDIOLOGY
PANDHI, JAY
Provider ID: 269087
Board Certified Specialty: No
655 EUCLID AVE STE 208
NATIONAL CITY, CA 91950
Phone: (619) 512-1915
Fax: (619) 512-1913
After Hours Phone: (619) 512-1915
Provider Gender: Male
NPI: 1407997406
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY
ROUGH, STEVEN
Provider ID: 301320
Board Certified Specialty: No
1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619) 434-4288
Provider Gender: Male
NPI: 1386821460
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY
ROUGH, STEVEN
Provider ID: 302044
Board Certified Specialty: No
1415 E 8TH ST STE 6
NATIONAL CITY, CA 91950
Phone: (619) 434-4288
Fax: (619) 434-4315
After Hours Phone: (619) 434-4288
Provider Gender: Male
NPI: 1386821460
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, ALVARADO HOSP MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

NEPHROLOGY
COMUNALE, RODERICK
Provider ID: 290784
Board Certified Specialty: No
502 EUCLID AVE STE 205
NATIONAL CITY, CA 91950
Phone: (858) 551-0276
Fax: (858) 454-8796
After Hours Phone: (858) 551-0276
Provider Gender: Male
NPI: 1568462109
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, PARADISE VALLEY HOSPITAL,
ALVARADO HOSPITAL LLC,
SCRIPPS MERCY HOSPITAL
ALVARADO HOSP MED CTR,
KINDRED HOSPITAL SAN DIEGO, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 21-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

ASLIAN, AZITA
Provider ID: 301797
Board Certified Specialty: No
1136 D AVE
NATIONAL CITY, CA 91950
Phone: (619) 662-4100
Fax: (619) 336-2323
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1851667661
Provider English Spoken: Y
Provider Language(s) Spoken: Fataleka
Cultural Competency: N
Hospital Affiliation: Hemet Global Medical Center, Menifee Global Medical Center,
SCRIPPS MERCY HOSPITAL
CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM
Website: N/A
Email: pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY
DEL ROSARIO, GELEN
Provider ID: 257478
Board Certified Specialty: No
502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Phone: (619) 475-1261
Fax: (619) 475-1267
After Hours Phone: (619) 475-1261
Provider Gender: Female
NPI: 1255643474
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A
Email: pquiroz_80@hotmail.com

OBSTETRICS / GYNECOLOGY
DEL ROSARIO, GELEN
Provider ID: 269247
Board Certified Specialty: No
502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950
Phone: (619) 475-1261
Fax: (619) 475-1267
After Hours Phone: (619) 475-1261
Provider Gender: Female
NPI: 1255643474
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
CHULA VISTA MED CTR,
PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes

1875
D3. 專業提供者目錄

Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
9:00AM-5:00PM

Website: N/A
Email: pquiroz_80@hotmail.com

**OBSTETRICS / GYNECOLOGY**

**DEL ROSARIO, GELEN**
Provider ID: 206092
Board Certified Specialty: No

502 EUCLID AVE STE 300
NATIONAL CITY, CA 91950

Phone: (619) 475-1261
Fax: (619) 475-1267

After Hours Phone: (619) 475-1261

Provider Gender: Female
NPI: 1255643474

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP

**WINESBURG, JENNIFER**
Provider ID: 302451
Board Certified Specialty: No

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

Phone: (619) 662-4100
Fax: (619) 259-2807

After Hours Phone: (619) 662-4100

Provider Gender: Female
NPI: 1811162456

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

MERCY HOSPITAL, SHARP

CORONADO HOSP AND

HEALTHCARE CTR,

gROSSMONT HOSPITAL,

DESERT REGIONAL MED CTR

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**OPTOMETRIST**

**AOTO, KIM**
Provider ID: 268722
Board Certified Specialty: No

2240 E PLAZA BLVD STE F-G
NATIONAL CITY, CA 91950

Phone: (800) 898-2020
Fax: (844) 897-3788

After Hours Phone: (800) 898-2020

Provider Gender: Female
NPI: 1780935650

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

**OPHTHALMOLOGY**

**HAIGHT, BRUCE**
Provider ID: 269113
Board Certified Specialty: No

655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950

Phone: (800) 898-2020
Fax: (844) 897-3788

After Hours Phone: (800) 898-2020

Provider Gender: Male
NPI: 1427029628

Provider English Spoken: Y
Cultural Competency: N

Hospital Affiliation: GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A
OPTOMETRIST
KOO, ANITA
Provider ID: 304538
Board Certified Specialty: No
1520 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 425-7755
Fax: (619) 425-2138
After Hours Phone: (619) 425-7755
Provider Gender: Female
NPI: 1669825667
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

PODIATRIST
DAVIDSON, JOHN
Provider ID: 129542
Board Certified Specialty: No
610 EUCLID AVE STE 301
NATIONAL CITY, CA 91950
Phone: (619) 427-3481
Fax: (619) 420-7807
After Hours Phone: (619) 427-3481
Provider Gender: Male
NPI: 1689069874
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-4:30PM
Website: N/A

PULMONARY DISEASES
LIM, ROSEMARIE
Provider ID: 262224
Board Certified Specialty: No
610 EUCLID AVE STE 202
NATIONAL CITY, CA 91950
Phone: (619) 472-4900
Fax: (619) 479-9468
After Hours Phone: (619) 472-4900
Provider Gender: Female
NPI: 1841303419
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
CHENG, BRANDON
Provider ID: 304531
Board Certified Specialty: No
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
D3. 专业提供者目录

- **JIMENEZ, ANDREA**
  - Provider ID: 299888
  - Board Certified Specialty: No
  - Address: 3400 E 8TH ST STE 108
  - NATIONAL CITY, CA 91950
  - Phone: (619) 482-3000
  - Fax: (619) 482-3001
  - Provider Gender: Female
  - NPI: 1407440670
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 7:00AM-6:00PM
  - Website: N/A

- **NGUYEN, TIA**
  - Provider ID: 305012
  - Board Certified Specialty: No
  - Address: 3400 E 8TH ST STE 108
  - NATIONAL CITY, CA 91950
  - Phone: (619) 482-3000
  - Fax: (619) 695-0050
  - Provider Gender: Female
  - NPI: 1457136269
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 16\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 7:00AM-6:00PM
  - Website: N/A

- **NOVENCIDO, ANDREW**
  - Provider ID: 1699357525
  - Board Certified Specialty: No
  - Address: 3400 E 8TH ST STE 108
  - NATIONAL CITY, CA 91950
  - Phone: (619) 482-3000
  - Fax: (619) 482-3001
  - Provider Gender: Male
  - NPI: 1407440670
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 7:00AM-6:00PM
  - Website: N/A

- **REGISTERED PHYSICAL THERAPIST**

- **KARANDE, PRACHI**
  - Provider ID: 287102
  - Board Certified Specialty: No
  - Address: 3400 E 8TH ST STE 108
  - NATIONAL CITY, CA 91950
  - Phone: (619) 482-3000
  - Fax: (619) 482-3001
  - Provider Gender: Female
  - NPI: 1699357525
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 7:00AM-6:00PM
  - Website: N/A

- **REGISTERED PHYSICAL THERAPIST**

- **NGUYEN, TIA**
  - Provider ID: 305011
  - Board Certified Specialty: No
  - Address: 3400 E 8TH ST STE 108
  - NATIONAL CITY, CA 91950
  - Phone: (619) 482-3000
  - Fax: (619) 695-0050
  - Provider Gender: Female
  - NPI: 1457136269
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 7:00AM-6:00PM
  - Website: N/A

- **REGISTERED PHYSICAL THERAPIST**

- **NOVENCIDO, ANDREW**
  - Provider ID: 1457136269
  - Board Certified Specialty: No
  - Address: 3400 E 8TH ST STE 108
  - NATIONAL CITY, CA 91950
  - Phone: (619) 482-3000
  - Fax: (619) 482-3001
  - Provider Gender: Male
  - NPI: 1336894724
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-TH 7:00AM-7:00PM
  - Website: N/A
D3. Professional Provider Directory

Provider ID: 301996
Board Certified Specialty: No
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
SPARKS, TODD
Provider ID: 301110
Board Certified Specialty: No
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1265481139
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
NOVENCIDO, ANDREW
Provider ID: 286784
Board Certified Specialty: No
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1447723937
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
SUGGS, SARAH
Provider ID: 298366
Board Certified Specialty: No
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1083353650
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
SUGGS, SARAH
Provider ID: 301430
Board Certified Specialty: No
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Female
NPI: 1083353650
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 7:00AM-7:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D3. 專業提供者目錄

VILLANUEVA, GIOVANNI
Provider ID: 301533
Board Certified Specialty: No
3400 E 8TH ST STE 108
NATIONAL CITY, CA 91950
Phone: (619) 482-3000
Fax: (619) 695-0050
After Hours Phone: (619) 482-3000
Provider Gender: Male
NPI: 1063046878
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
Medicare Open Panel: No
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MERCY HOSPITAL, SCRIPPS
MERCY HOSPITAL CHULA VISTA
Provider ID: 294937
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1497202121
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
BAE, JINYI
Provider ID: 298197
Board Certified Specialty: No
619 CROUCH ST STE 100
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1871154526
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\100
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OCEANSIDE

ANESTHESIOLOGY PAIN MANAGEMENT
DAIRO, BRANDON
Provider ID: 299882
Board Certified Specialty: No
3231 WARING CT STE K
OCEANSIDE, CA 92056
Phone: (760) 607-5350
After Hours Phone: (760) 607-5350
Provider Gender: Male
NPI: 1689092470
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS

CERTIFIED NURSE PRACTITIONER
BALDWIN, ANDREA
Provider ID: 294937
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1497202121
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
BINEETE, DONYA
Provider ID: 303861
Board Certified Specialty: No
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1427325166
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
D3. 專業提供者目錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
  8:00AM-5:00PM
  SA 8:00AM-4:30PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
CARLSON, KATHLEEN
Provider ID: 300217
Board Certified Specialty: No
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1629180161
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
  8:00AM-8:00PM
  F 8:00AM-5:00PM
  SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
CHILAKA, SAMUEL
Provider ID: 301313
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 736-6763
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1679140644
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
  8:00AM-8:00PM
  F 8:00AM-5:00PM
  SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
CHILAKA, SAMUEL
Provider ID: 301314
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1679140644
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
  8:00AM-8:00PM
  F 8:00AM-5:00PM
  SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
CHIRIBOGA, MEGAN ELISE
Provider ID: 295492
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1679140644
 Provider English Spoken: Y
 Cultural Competency: N
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
American Sign Language (ASL): N

CERTIFIED NURSE PRACTITIONER

CHOI, JI

Provider ID: 299766
Board Certified Specialty: No
605 CROUCH ST STE C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1891207668
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

CHRISTY, TYLER

Provider ID: 303930
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

CISZEK, ALEXANDRA

Provider ID: 306002
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

605 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1578220612
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HARRIS, PAMELA
Provider ID: 302289
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1326052457
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
GENOVESE, KELLY
Provider ID: 301304
Board Certified Specialty: No
2210 MESA DR STE 5
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1326052457
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HEAD, KRISTIN
Provider ID: 268660
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1699078923
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HARRIS, PAMELA
Provider ID: 302290
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1407545221
Provider English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

HERNANDEZ, JESSICA
Provider ID: 304495
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HERNANDEZ, JESSICA
Provider ID: 302300
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HERNANDEZ, JESSICA
Provider ID: 302298
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HERNANDEZ, JESSICA
Provider ID: 302299
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
KELLEHER, BRIDGET
1884
<table>
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<tr>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Provider Gender</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Provider Language(s)</th>
<th>Cultural Competency</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Accessibility</th>
<th>Website</th>
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<tr>
<td>Provider ID: 298084</td>
<td>No</td>
<td>4700 N RIVER RD</td>
<td>(760) 631-5000</td>
<td>(760) 631-5000</td>
<td>Female</td>
<td>1245695006</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>Spanish</td>
<td>N</td>
<td>TRI CITY MEDICAL CTR</td>
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<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
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<td>Provider ID: 298081</td>
<td>No</td>
<td>517 N HORNE ST</td>
<td>(760) 631-5000</td>
<td>(760) 631-5000</td>
<td>Female</td>
<td>1245695006</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>Spanish</td>
<td>N</td>
<td>TRI CITY MEDICAL CTR</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
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<td>Provider ID: 295287</td>
<td>No</td>
<td>4700 N RIVER RD</td>
<td>(760) 631-5000</td>
<td>(760) 414-3892</td>
<td>Male</td>
<td>1790978617</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>N</td>
<td>MIN/MAX AGE: 6\999</td>
<td>TRI CITY MEDICAL CTR</td>
<td>Yes</td>
<td>6\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
</tr>
<tr>
<td>Provider ID: 295286</td>
<td>No</td>
<td>818 PIER VIEW WAY</td>
<td>(760) 631-5000</td>
<td>(760) 414-3892</td>
<td>Male</td>
<td>1790978617</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>N</td>
<td>MIN/MAX AGE: 6\999</td>
<td>TRI CITY MEDICAL CTR</td>
<td>Yes</td>
<td>6\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
</tr>
</tbody>
</table>
D3. 專業提供者目錄

- **CERTIFIED NURSE PRACTITIONER**
  - **MONTGOMERY, KEITH ALLEN**
    - Provider ID: 295285
    - Board Certified Specialty: No
    - Provider Gender: Male
    - NPI: 1790978617
    - 517 N HORNE ST
      - OCEANSIDE, CA 92054
    - Phone: (760) 631-5000
    - Fax: (760) 414-3892
    - After Hours Phone: (760) 631-5000
    - Provider English Spoken: Y
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 6\1999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-TU 8:00AM-5:00PM
      - W 10:00AM-7:00PM
      - TH-F 8:00AM-5:00PM
      - SA 9:00AM-4:00PM
    - Website: N/A

- **CERTIFIED NURSE PRACTITIONER**
  - **PRITZKER, JOELY**
    - Provider ID: 239772
    - Board Certified Specialty: No
    - Provider Gender: Female
    - NPI: 1619384351
    - 4700 N RIVER RD
      - OCEANSIDE, CA 92057
    - Phone: (760) 631-5000
    - Fax: (760) 414-3892
    - After Hours Phone: (760) 631-5000
    - Provider English Spoken: Y
    - Provider Language(s)
      - Spanish
    - Cultural Competency: N
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 12\1999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-F 8:00AM-5:00PM
      - SA 9:00AM-4:00PM
    - Website: N/A

- **CERTIFIED NURSE PRACTITIONER**
  - **RAYTA, NICOLE**
    - Provider ID: 304682
    - Board Certified Specialty: No
    - Provider Gender: Female
    - NPI: 1689027542
    - 517 N HORNE ST
      - OCEANSIDE, CA 92054
    - Phone: (760) 631-5000
    - Fax: (760) 414-3892
    - After Hours Phone: (760) 631-5000
    - Provider English Spoken: Y
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 18\1999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-F 8:00AM-5:00PM
      - SA 9:00AM-4:00PM
    - Website: N/A

- **CERTIFIED NURSE PRACTITIONER**
  - **RONCAROLO DE VRIES, ROXANE**
    - Provider ID: 298765
    - Board Certified Specialty: No
    - Provider Gender: Male
    - NPI: 1497402184
    - 2210 MESA DR STE 5
      - OCEANSIDE, CA 92054
    - Phone: (760) 736-6767
    - Fax: (760) 736-8740
    - After Hours Phone: (760) 736-6767
    - Provider English Spoken: Y
    - Medi-Cal Open Panel: No
    - Min/Max Age: 0\1999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
    - Hours: M-F 8:00AM-5:00PM
    - Website: N/A

- **CERTIFIED NURSE PRACTITIONER**
  - **SANTIAGO, AMANDA**
    - Provider ID: 242607
    - Board Certified Specialty: No
    - Provider Gender: Female
    - NPI: 1619488731
    - 4700 N RIVER RD
      - OCEANSIDE, CA 92057
    - Phone: (760) 631-5000
    - Fax: (760) 414-3892
    - After Hours Phone: (760) 631-5000
    - Provider English Spoken: Y

Your PCP’s doctor group may have their own network mental health services providers. Please refer to the below list. You can directly contact those providers. Please note, certain services may require pre-authorization from your mental health services provider for Blue Shield, then the service can be covered.

To get the mental health services provider list online, please visit blueshieldca.com/fad.
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

SHAHBAZ, LINNAE
Provider ID: 304822
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1427712215
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: TU-W
0:00PM-8:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER
Provider ID: 295505
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER

TAYLOR, CHRISTOPHER
Provider ID: 295506
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM
Website: N/A
D3. 專業提供者目錄

631-5000
Provider Gender: Male
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-2:00PM
  SA 9:00AM-4:00PM
 Website: N/A
CERTIFIED NURSE PRACTITIONER
WINDHAM, SUZONNE
Provider ID: 303723
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
  SA 8:00AM-4:00PM
 Website: N/A
CERTIFIED NURSE PRACTITIONER
WINDHAM, SUZONNE
Provider ID: 303722
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
  SA 8:00AM-4:00PM
 Website: N/A
CERTIFIED NURSE PRACTITIONER
WINDHAM, SUZONNE
Provider ID: 303841
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
 Phone: (760) 631-5000
 Fax: (760) 414-3892
 After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
  SA 8:00AM-4:00PM
 Website: N/A
CERTIFIED REGISTERED NURSE MIDWIFE
KELLY, KATHERINE
Provider ID: 290312
Board Certified Specialty: No
2210 MESA DR STE 5
D3. 专业提供者目錄

OCEANSIDE, CA 92054

Phone: (760) 757-5841
Fax: (760) 736-8740

After Hours Phone: (760) 757-5841
Provider Gender: Female
NPI: 1801134275

Provider English Spoken: Y
Provider Language(s)
  Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

PERLMAN, TAMARA

Provider ID: 290733
Board Certified Specialty: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE

SCROEDER, MARY

Provider ID: 290688
Board Certified Specialty: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

CHIROPRACtOR

JU, NATHANIEL

Provider ID: 290221
Board Certified Specialty: No

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Website: N/A

EMERGENCY MEDICINE

PHAM, LILY

Provider ID: 304934
Board Certified Specialty: No
D3. 專業提供者目錄

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1811423072
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: RAY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
MARTINEZ, LESLY
Provider ID: 298004
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (766) 315-0000
Fax: (766) 414-3892
After Hours Phone: (766) 315-0000
Provider Gender: Female
NPI: 1629509260
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
NGUYEN, DANIELA
Provider ID: 305348
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1891069662
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
MARTINEZ, LESLY
Provider ID: 298006
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1629509260
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
Website: N/A
D3. Professional Provider Directory

**PROVIDER**

- **Hours:** M-F
  - 8:00AM-5:00PM
- **Website:** N/A

**FAMILY PRACTICE**

**NGUYEN, DANIELA**

- Provider ID: 305349
- Board Certified Specialty: No
- 818 PIER VIEW WAY
  - OCEANSIDE, CA 92054
  - Phone: (760) 631-5000
  - Fax: (760) 414-3892
  - After Hours Phone: (760) 631-5000
- Provider Gender: Female
- NPI: 1891069662
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 12\999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
    - SA 9:00AM-4:00PM
- Website: N/A

**FAMILY PRACTICE**

**VIDAL, MONICA**

- Provider ID: 293352
- Board Certified Specialty: No
- 517 N HORNE ST
  - OCEANSIDE, CA 92054
  - Phone: (760) 631-5000
  - Fax: (760) 414-3892
  - After Hours Phone: (760) 631-5000
- Provider Gender: Female
- NPI: 1871791749
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
  - Website: N/A

**FAMILY PRACTICE**

**SALAMANCA, OMAR**

- Provider ID: 295469
- Board Certified Specialty: No
- 505 CROUCH ST
  - OCEANSIDE, CA 92054
  - Phone: (760) 736-6767
  - Fax: (760) 736-8740
  - After Hours Phone: (760) 736-6767
- Provider Gender: Male
- NPI: 1083000947
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: KERN MEDICAL CENTER
- Medi-Cal Open Panel: Yes
- Min/Max Age: 14\999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
  - Website: N/A

**FAMILY PRACTICE**

**VIDAL, MONICA**

- Provider ID: 293350
- Board Certified Specialty: No
- 818 PIER VIEW WAY
  - OCEANSIDE, CA 92054
  - Phone: (844) 308-5003
  - Fax: (760) 414-3763
  - After Hours Phone: (844) 308-5003
- Provider Gender: Female
- NPI: 1871791749
- Provider English Spoken: Y
- Provider Language(s)
D3. 專業提供者目錄

VIDAL, MONICA
Provider ID: 293353
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1871791749
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

MATERNAL AND FETAL MEDICINE
MELBER, DORA
Provider ID: 296991
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
REIMERS, REBECCA
Provider ID: 294651
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
MELBER, DORA
Provider ID: 296991
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Provider Language(s)
Spoken: Hungarian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
RICHARDSON, ALVIE
Provider ID: 264686
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Memorial Hospital, Rady Childrens Hospital San Diego, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
D3. 專業提供者目錄

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA
Provider ID: 255793
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1760730758
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDREN'S HOSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

LIU, ANDREW
Provider ID: 301573
Board Certified Specialty: No
3300 VISTA WAY
OCEANSIDE, CA 92056
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760)
D3. 專業提供者目錄

NEUROLOGY
JINDAL, ANUJA
Provider ID: 206266
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1194046581
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
BINDER, PRATIBHA
Provider ID: 273226
Board Certified Specialty: No
4002 VISTA WAY
OCEANSIDE, CA 92056
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174758031
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD Medical Center, UCSD La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEPHROLOGY
LIU, ANDREW
Provider ID: 305443
Board Certified Specialty: No
3300 VISTA WAY STE B
OCEANSIDE, CA 92056
Phone: (760) 967-9900
Fax: (760) 967-6769
After Hours Phone: (760) 967-9900
Provider Gender: Male
NPI: 1710481866
Provider English Spoken: Y
Provider Language(s):
Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI City Medical Center, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

NEUROLOGY CHILD
SAHAGIAN, MICHELLE
Provider ID: 206075
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1275604035
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD Medical Center, UCSD La Jolla
John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 16-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

OPHTHALMOLOGY
BANSAL, PREETI
Provider ID: 205619
Board Certified Specialty: No
- PROVIDER
  Hours: M-F
  8:00AM-5:00PM
- Website: N/A

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
- Phone: (960) 547-1020
  Fax: (760) 547-1021
- After Hours Phone: (960) 547-1020
Provider Gender: Female
NPI: 1871664631
- Provider English Spoken: Y
  Cultural Competency: N
Hospital Affiliation: RAY CHILDREN'S HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
  8:00AM-5:00PM
Website: N/A

BHATIA, SHAGUN
Provider ID: 267318
Board Certified Specialty: No
- PROVIDER
  Hours: M-F
  8:00AM-5:00PM
- Website: N/A

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
- Phone: (760) 547-1020
  Fax: (760) 547-1021
- After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1104237353
- Provider English Spoken: Y
  Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RAY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
  8:00AM-5:00PM
Website: N/A

JACOBSEN, BRADLEY
Provider ID: 302868
Board Certified Specialty: Yes
- PROVIDER
  Hours: M-F
  8:00AM-5:00PM
- Website: N/A

3231 WARING CT STE S
OCEANSIDE, CA 92056
- Phone: (760) 631-6144
  Fax: (760) 724-3920
- After Hours Phone: (760) 631-6144
Provider Gender: Male
NPI: 1760845184
- Provider English Spoken: Y
  Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
  8:00AM-5:00PM
Website: N/A

HENNEIN, LAUREN
Provider ID: 297013
Board Certified Specialty: No
- PROVIDER
  Hours: M-F
  8:00AM-5:00PM
  8:00AM-5:00PM
Website: N/A

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
- Phone: (760) 547-1020
  Fax: (760) 547-1021
- After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1699216010
- Provider English Spoken: Y
  Cultural Competency: N
Hospital Affiliation: RAY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
  8:00AM-5:00PM
Website: N/A

MOLL, ANGELA
Provider ID: 205509

1895
D3. 專業提供者目錄

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020
Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Female
NPI: 1861648602

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

MOVAGHAR, MANSOOR
Provider ID: 216416

Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020
Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Male
NPI: 1497792220

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: N/A

OPHTHALMOLOGY

SHEILS, CATHERINE
Provider ID: 305308

Board Certified Specialty: No

3637 VISTA WAY
OCEANSIDE, CA 92056

Phone: (760) 758-2008
Fax: (760) 758-2004

After Hours Phone: (760) 758-2008

Provider Gender: Female
NPI: 1932605649

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 18\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TU
8:30AM-4:00PM
W-F 8:30AM-1:00PM

Website: N/A

OPHTHALMOLOGY

SONG, DELU
Provider ID: 302871

Board Certified Specialty: No

3231 WARING CT STE S
OCEANSIDE, CA 92056

Phone: (760) 631-6144
Fax: (760) 724-3920

After Hours Phone: (760) 631-6144

Provider Gender: Male
NPI: 1437689536

8:00AM-5:00PM
Website: N/A
D3. 服務提供者目錄

- **OPTOMETRIST**  GEE, JENNIFER
  - Provider ID: 290927
  - Board Certified Specialty: No
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 18-999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A
  - Provider Gender: Female
  - NPI: 1336589332

- **OPTOMETRIST**  KIM, MICHAEL
  - Provider ID: 290902
  - Board Certified Specialty: No
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0-999
  - American Sign Language (ASL): N
  - Provider Gender: Male
  - NPI: 1164546313

- **OPTOMETRIST**  MORR, WENDY
  - Provider ID: 290237
  - Board Certified Specialty: No
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0-999
  - American Sign Language (ASL): N
  - Provider Gender: Female
  - NPI: 1164546313
D3. Professional Directory

OPTOMETRIST
RING, ROBERT
Provider ID: 269380
Board Certified Specialty: No
Phone: (760) 726-9383
Fax: (760) 726-9897
Provider Gender: Male
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
MORA, WENDY
Provider ID: 290929
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
RING, ROBERT
Provider ID: 269380
Board Certified Specialty: No
Phone: (760) 726-9383
Fax: (760) 726-9897
Provider Gender: Male
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
TAM, EMILY
Provider ID: 290317
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
TAM, EMILY
Provider ID: 290317
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
TRAN, JESSICA
Provider ID: 303732
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Website: N/A

Your PCP's health plan may have their own network of mental health service providers. Please refer to the list below. You may contact the service providers directly. Please note, some services may require preauthorization from a mental health service provider to be covered under Blue Shield.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
D3. 專業提供者目錄

OPTOMETRIST
TRAN, JESSICA
Provider ID: 304887
Board Certified Specialty: No
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5'21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPTOMETRIST
TRAN, JESSICA
Provider ID: 303730
Board Certified Specialty: No
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 5'21
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPTOMETRIST
TRAN, JESSICA
Provider ID: 304886
Board Certified Specialty: No
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0'999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
BLISS, MORGAN
Provider ID: 206086
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1760707657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
FRIESEN, TZYYNONG
Provider ID: 244899
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1952740177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSF Benioff Children's Hospital Oakland
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
PATEL, VIJAY
Provider ID: 297036
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Male
NPI: 1508250747
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Valley Children's Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
Website: N/A
PEDIATRIC EMERGENCY MEDICINE
BELLOMO, THOMAS
Provider ID: 205603
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1285014498
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
CHOO, SUN
Provider ID: 296537
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1700047628
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
GROSS, MATTHEW
Provider ID: 297175
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1316162324
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
GORHAM, LAURA
Provider ID: 275786
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1316162324
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A
D3. 專業提供者目錄

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Male
NPI: 1942223664
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
KINGDON, JOANNA
Provider ID: 302319
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1609495399
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
JOSHI, WEENA
Provider ID: 262236
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1376862177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
LOVEJOY, AMY
Provider ID: 206109
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1790856557
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL OF ORANGE COUNTY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
PARK, RONALD
Provider ID: 295456
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Male
NPI: 1881695914

1902
D3. Professional Providers Directory

- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
- **Medi-Cal Open Panel:** No
- **Min/Max Age:** 0\19
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** SU 1:00PM-10:00PM
  M-F 4:00PM-10:00PM
  SA 1:00PM-10:00PM
- **Website:** N/A

**PEDIATRIC EMERGENCY MEDICINE**

**PARKER, SHERINE**
Provider ID: 205787
Board Certified Specialty: No
Address: 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1477626513
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\19
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** SU 1:00PM-10:00PM
  M-F 4:00PM-10:00PM
  SA 1:00PM-10:00PM
- **Website:** N/A

**QUINONES-PEREZ, BIANCA**
Provider ID: 206951
Board Certified Specialty: No
Address: 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1124360565
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\19
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** SU 1:00PM-10:00PM
  M-F 4:00PM-10:00PM
  SA 1:00PM-10:00PM
- **Website:** N/A

**RUSSELL, SAMUEL**
Provider ID: 301251
Board Certified Specialty: No
Address: 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Male
NPI: 1215564265
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\19
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** SU 1:00PM-10:00PM
  M-F 4:00PM-10:00PM
  SA 1:00PM-10:00PM
- **Website:** N/A

**SANACORA, RACHEL**
Provider ID: 297730
Board Certified Specialty: No
Address: 3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1000
Fax: (760) 547-1021
After Hours Phone: (760) 547-1000
Provider Gender: Female
NPI: 1548987985
- **Provider English Spoken:** Y
- **Provider Language(s) Spoken:** Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** RADY CHILDRENS HOSPITAL SAN DIEGO
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\19
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** SU 1:00PM-10:00PM
  M-F 4:00PM-10:00PM
  SA 1:00PM-10:00PM
- **Website:** N/A

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1903
D3. 專業提供者目錄

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19

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

**Accessibility:** CONTACT PROVIDER

**Hours:** SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

**Website:** N/A

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**

Provider ID: 205813
Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1000
Fax: (760) 547-1021

After Hours Phone: (760) 547-1000

Provider Gender: Female
NPI: 1083840920

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RAY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

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

**Accessibility:** CONTACT PROVIDER

**Hours:** SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM

**Website:** N/A

**PEDIATRIC EMERGENCY MEDICINE**

**WANG, EMILY**

Provider ID: 265953
Board Certified Specialty: No

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

Phone: (760) 547-1020
Fax: (760) 547-1021

After Hours Phone: (760) 547-1020

Provider Gender: Female
NPI: 1427142363

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL
### D3. 專業提供者目錄

- **HOSPITAL ENCINITAS, RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL**
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\19
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
  - Website: N/A

- **PEDIATRIC GASTROENTEROLOGY**
  - **CHU, CHRISTOPHER**
    - Provider ID: 301642
    - Board Certified Specialty: No
    - 3605 VISTA WAY STE 172
      - OCEANSIDE, CA 92056
    - Phone: (760) 547-1020
    - Fax: (760) 547-1021
    - After Hours Phone: (760) 547-1020
    - Provider Gender: Male
    - NPI: 1912369273
    - Provider English Spoken: Y
    - Language(s) Spoken: Spanish, Yue Chinese
    - Cultural Competency: N
    - Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\19
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER

- **PEDIATRIC PULMONOLOGY**
  - **LENHART-PENDERGRASS, PATRICIA**
    - Provider ID: 294643
    - Board Certified Specialty: No
    - 3605 VISTA WAY STE 172
      - OCEANSIDE, CA 92056
    - Phone: (760) 547-1020
    - Fax: (760) 547-1021
    - After Hours Phone: (760) 547-1020
    - Provider Gender: Female
    - NPI: 1144615659
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\19
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER

- **PHYSICAL MEDICINE / REHABILITATION**
  - **RYAN, KYLE**
    - Provider ID: 275661
    - Board Certified Specialty: No
    - 3605 VISTA WAY
      - OCEANSIDE, CA 92056
    - Phone: (760) 547-1020
    - Fax: (760) 547-1021
    - After Hours Phone: (760) 547-1020
    - Provider Gender: Male
    - NPI: 1447645742
    - Provider English Spoken: Y
    - Cultural Competency: N
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0\19
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

PHYSICIANS ASSISTANT
BASIN, NATALIE
Provider ID: 304442
Board Certified Specialty: No
3629 VISTA WAY
OCEANSIDE, CA 92056
Phone: (760) 757-7546
Fax: (760) 547-2311
After Hours Phone: (760) 757-7546
Provider Gender: Female
NPI: 1477196897
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
KIVIAT, ANNETTE
Provider ID: 302455
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1205381845
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
RAMOS, ELENA
Provider ID: 301307
Board Certified Specialty: No
605 CROUCH ST BLDG C
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1306489570
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
WRIGHT, DEREK
Provider ID: 305530
Board Certified Specialty: No
3231 WARING CT STE K
OCEANSIDE, CA 92056
Phone: (760) 607-5350
Fax: (760) 607-5365
After Hours Phone: (760) 607-5350

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
Provider Gender: Male
NPI: 1629674858
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
COOK, SHERYL
Provider ID: 304924
Board Certified Specialty: No
619 CROUCH ST STE 100
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1750420816
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
KRAPES, MICHAEL
Provider ID: 290097
Board Certified Specialty: No
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1215233028
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
FARRAR, COURTNEY
Provider ID: 295874
Board Certified Specialty: No
3231 WARING CT STE K
OCEANSIDE, CA 92056
Phone: (760) 607-5350
Fax: (760) 607-5365
After Hours Phone: (760) 607-5350
Provider Gender: Male
NPI: 1124577952
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 13\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

D3. 專業提供者目錄

**SURGERY COLON SURGERY**

**NASSERY, KRISTEN**

Provider ID: 300122  
Board Certified Specialty: No  
3601 VISTA WAY STE 203  
OCEANSIDE, CA 92056  
Phone: (760) 724-5352  
Fax: (760) 724-5447  
After Hours Phone: (760) 724-5352  
Provider Gender: Female  
NPI: 1396059440  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**SURGERY ORTHOPEDIC**

**PRUSS, ERIKA**

Provider ID: 303798  
Board Certified Specialty: No  
3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
Phone: (760) 547-1020  
Fax: (760) 547-1021  
After Hours Phone: (760) 547-1020  
Provider Gender: Female  
NPI: 1538402441  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**SURGERY PEDIATRIC**

**FAIRBANKS, TIMOTHY**

Provider ID: 205498  
Board Certified Specialty: No  
3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
Phone: (760) 547-1020  
Fax: (760) 547-1021  
After Hours Phone: (760) 547-1020  
Provider Gender: Male  
NPI: 1407010556  
Provider English Spoken: Y  
Cultural Competency: N

---

**SURGERY ORTHOPEDIC**

**UPASANI, VIDYADHAR**

Provider ID: 260954  
Board Certified Specialty: No  
3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056  
Phone: (760) 547-1020  
Fax: (760) 547-1021  
After Hours Phone: (760) 547-1020  
Provider Gender: Male  
NPI: 1548417652  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A
D3. 專業提供者目錄

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC
KLING, KAREN
Provider ID: 206129
Board Certified Specialty: No
3605 VISTA WAY STE 172
OCEANSIDE, CA 92056
Phone: (760) 547-1020
Fax: (760) 547-1021
After Hours Phone: (760) 547-1020
Provider Gender: Female
NPI: 1982775144
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY THORACIC
GRAMINS, DANIEL
Provider ID: 210048
Board Certified Specialty: No
3998 VISTA WAY STE A
OCEANSIDE, CA 92056
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1164495750
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

POWAY

CARDIOVASCULAR DISEASE
ZAKOV, KAMEN
Provider ID: 122539
Board Certified Specialty: Yes
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3110
Fax: (858) 613-2937
After Hours Phone: (858) 675-3110
Provider Gender: Male
NPI: 1518933613
Provider English Spoken: Y
Provider Language(s) Spoken: German
Cultural Competency: N

PERRIS

CERTIFIED NURSE PRACTITIONER
BLAND, JACELIS
Provider ID: 296767
D3. 專業提供者目錄

**Hospital Affiliation**: PALOMAR HEALTH, PALOMAR MEDICAL CENTER  
**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 0\150  
**American Sign Language (ASL)**: N  
| Accessibility: CONTACT PROVIDER  
| Hours: M-F  
| 8:00AM-5:00PM  
| Website: N/A  

**CERTIFIED NURSE PRACTITIONER**

**JOHNSON, CHRISTINE**  
**Provider ID**: 295458  
**Board Certified Specialty**: No  
**Address**: 13010 POWAY RD  
POWAY, CA 92064  
| Phone: (858) 218-3000  
| Fax: (360) 462-2742  
| After Hours Phone: (858) 218-3000  
**Provider Gender**: Female  
**NPI**: 1295049229  
| Provider English Spoken: Y  
| Cultural Competency**: N  
**Hospital Affiliation**: PARADISE VALLEY HOSPITAL  
**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 13\999  
**American Sign Language (ASL)**: N  
| Accessibility: CONTACT PROVIDER  
| Hours: M-F  
| 8:00AM-5:00PM  
| Website: N/A  

**CERTIFIED NURSE PRACTITIONER**

**WOLFE, AMANDA**  
**Provider ID**: 243582  
**Board Certified Specialty**: No  
**Address**: 15525 POMERADO RD STE B1  
POWAY, CA 92064  
| Phone: (858) 457-8333  
| After Hours Phone: (858) 457-8333  
**Provider Gender**: Female  
**NPI**: 1063813475  
| Provider English Spoken: Y  
| Cultural Competency**: N  
**Hospital Affiliation**: RADY CHILDRENS HOSPITAL SAN DIEGO  
**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 0\19  
**American Sign Language (ASL)**: N  
| Accessibility: CONTACT PROVIDER  
| Hours: M-F  
| 8:00AM-5:00PM  
| Website: N/A  

**CERTIFIED NURSE PRACTITIONER**

**WRIGHT, KIMBERLY**  
**Provider ID**: 256378  
**Board Certified Specialty**: No  
**Address**: 15611 POMERADO RD STE 400  
POWAY, CA 92064  
| Phone: (858) 675-3200  
| Fax: (858) 673-1587  
| After Hours Phone: (858) 675-3200  
**Provider Gender**: Female  
**NPI**: 1811400708  
| Provider English Spoken: Y  
| Cultural Competency**: N  
**Hospital Affiliation**: PALOMAR HEALTH  
**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 0\999  
**American Sign Language (ASL)**: N  
| Accessibility: CONTACT PROVIDER  
| Hours: M-F  
| 8:00AM-5:00PM  
| Website: N/A  

**FAMILY PRACTICE**

**FLINN, SCOTT**  
**Provider ID**: 270054  
**Board Certified Specialty**: No  
**Address**: 15611 POMERADO RD STE 400  
POWAY, CA 92064  
| Phone: (858) 675-3100  
| After Hours Phone: (858) 675-3100  
**Provider Gender**: Male  
**NPI**: 1184694598  
| Provider English Spoken: Y  
| Cultural Competency**: N  
**Hospital Affiliation**: PALOMAR HEALTH  
**Medi-Cal Open Panel**: Yes  
**Min/Max Age**: 0\999  
**American Sign Language (ASL)**: N  
| Accessibility: CONTACT PROVIDER  
| Hours: M-F  
| 8:00AM-5:00PM  
| Website: N/A  

**FAMILY PRACTICE**

**NAJAND, SADAF**  
**Provider ID**: 270055  
**Board Certified Specialty**: No
D3. Professional Providers Directory

15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3200
Fax: (858) 613-2938
After Hours Phone: (858) 675-3200
Provider Gender: Female
NPI: 1669769717
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
CHEN, ANDREW
Provider ID: 269315
Board Certified Specialty: No
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3100
Fax: (858) 613-2937
After Hours Phone: (858) 675-3100
Provider Gender: Male
NPI: 1134357007
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
WHITE, KERI
Provider ID: 269491
Board Certified Specialty: No
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3200
Fax: (858) 613-2938
After Hours Phone: (858) 675-3200
Provider Gender: Female
NPI: 1295701159
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
MANSOUR, DAVID
Provider ID: 291544
Board Certified Specialty: No
15611 POMERADO RD STE 575
POWAY, CA 92064
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760) 489-1458
Provider Gender: Male
NPI: 1295795037
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Hindi, Punjabi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N

THAPER, MOHINDERPAL
Provider ID: 270016
Board Certified Specialty: No
15611 POMERADO RD STE 575
POWAY, CA 92064
Phone: (760) 489-1458
Fax: (760) 489-1246
After Hours Phone: (760) 489-1458
Provider Gender: Male
NPI: 1295795037
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Punjabi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
D3. 專業提供者目錄

N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY

BAYAT, HAMED
Provider ID: 269450
Board Certified Specialty: No
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3110
Fax: (858) 675-3110
After Hours Phone: (858) 675-3110
Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SERRY, ROD
Provider ID: 269471
Board Certified Specialty: No
15611 POMERADO RD 400
POWAY, CA 92064
Phone: (858) 675-3110
Fax: (858) 675-3110
After Hours Phone: (858) 675-3110
Provider Gender: Male
NPI: 1356344196
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE

SAUER, CHARLES
Provider ID: 206164
Board Certified Specialty: No
15615 POMERADO RD
POWAY, CA 92064
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858) 613-4143
Provider Gender: Male
NPI: 1538388988

WEST, JULIE
Provider ID: 297072
Board Certified Specialty: No
15615 POMERADO RD
POWAY, CA 92064
Phone: (858) 613-4143
Fax: (858) 613-4539
After Hours Phone: (858) 613-4143
Provider Gender: Female
NPI: 1811151848
Provider English Spoken: Y
D3. 專業提供者目錄

**Cultural Competency: N**

Hospital Affiliation: RADI
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N

| Accessibility: CONTACT PROVIDER |
| Hours: M-F |
| 8:00AM-5:00PM |
| Website: N/A |

**OBSTETRICS / GYNECOLOGY**

**COBB, DAMON**

Provider ID: 206030
Board Certified Specialty: No

15706 POMERADO RD STE 110
POWAY, CA 92064
Phone: (858) 485-0130
Fax: (858) 485-0130

Provider Gender: Male
NPI: 1851435598

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

---

**OPHTHALMOLOGY**

**LOZIER, JEFFREY**

Provider ID: 270187
Board Certified Specialty: Yes

15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3100
Fax: (858) 618-1523

After Hours Phone: (858) 675-3100
Provider Gender: Male
NPI: 1225004450

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

| Accessibility: CONTACT PROVIDER |
| Hours: M-F |
| 9:00AM-5:00PM |
| Website: N/A |

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**OPTOMETRIST**

**KIM, MICHELLE**

Provider ID: 270014
Board Certified Specialty: No

15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3140
Fax: (858) 613-2936

After Hours Phone: (858) 675-3140
Provider Gender: Female
NPI: 1457328825

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

---

**PHYSICIANS ASSISTANT**

**CHATFIELD, ALEXANDRA**

Provider ID: 276715
Board Certified Specialty: No

15611 POMERADO RD STE 525
POWAY, CA 92064
Phone: (858) 485-0050
Fax: (858) 673-5187

After Hours Phone: (858) 485-0050
Provider Gender: Female
NPI: 1215584628

Provider English Spoken: Y
Cultural Competency: N

---
D3. 專業提供者目錄

PODIATRIST
HAN, KYOUNG
Provider ID: 296326
Board Certified Specialty: No
15706 POMERADO RD STE 102
POWAY, CA 92064
Phone: (858) 485-1494
Fax: (858) 485-1515
NPI: 1083954671
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

PODIATRIST
READ, TRENTON
Provider ID: 296656
Board Certified Specialty: No
15706 POMERADO RD STE 102
POWAY, CA 92064
Phone: (858) 485-1494
Fax: (858) 485-1515
NPI: 1083954671
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
VALLEZ-BARLAM, ANDREA
Provider ID: 290629
Board Certified Specialty: No
13010 POWAY RD
POWAY, CA 92064
Phone: (858) 218-3000
Fax: (858) 633-4688
After Hours Phone: (858) 218-3000
NPI: 1710902143
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RHEUMATOLOGY
RAO, SOUMYA
Provider ID: 46060
Board Certified Specialty: No
15611 POMERADO RD STE 400
POWAY, CA 92064
Phone: (858) 675-3150
Fax: (858) 924-1775
After Hours Phone: (858) 675-3150
Provider Gender: Female
NPI: 1033388616
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Kannada, Russian, Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP
Medi-Cal Open Panel: Yes
Min/Max Age: 18-150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RHEUMATOLOGY
REDDY, SMITHA
Provider ID: 269402
Board Certified Specialty: No
15725 POMERADO RD STE 117
POWAY, CA 92064
Phone: (858) 312-1717
Fax: (858) 435-0207
D3. Professional Provider Directory

- **After Hours Phone:** (858) 312-1717
  - Provider Gender: Female
  - NPI: 1750534715
  - Provider English Spoken: Y
  - Provider Language(s): Hindi, Kannada, Telugu
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MERCY HOSPITAL, PALOMAR HEALTH, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

**SURGERY ORTHOPEDIC**

**BALIKIAN, PHILIP**
- Provider ID: 257485
  - Board Certified Specialty: Yes
  - Hospital Affiliation: PALOMAR HEALTH
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

**SURGERY GENERAL**

**GROVE, JAY**
- Provider ID: 305851
  - Board Certified Specialty: No
  - Hospital Affiliation: PALOMAR HEALTH
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

**SURGERY ORTHOPEDIC**

**BRIEND, JAMES**
- Provider ID: 269500
  - Board Certified Specialty: No
  - Hospital Affiliation: PALOMAR HEALTH
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\150
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A
D3. 專業提供者目錄

CERTIFIED NURSE PRACTITIONER

SALAS, JESSICA
Provider ID: 269344
Board Certified Specialty: No
211 13TH ST
RAMONA, CA 92065
Phone: (760) 789-5160
Fax: (760) 788-7962
After Hours Phone: (760) 789-5160
Provider Gender: Female
NPI: 1356817431
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE

WELLS, TODD
Provider ID: 299118
Board Certified Specialty: No
211 13TH ST
RAMONA, CA 92065
Phone: (760) 789-5160
Fax: (760) 722-5292
After Hours Phone: (760) 789-5160
Provider Gender: Male
NPI: 1952377806
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

ALLERGY IMMUNOLOGY

JAMES, CHRISTINE
Provider ID: 284917
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144589979
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL):
### Allergy Immunology

**Riedl, Marc**

Provider ID: 255768  
Board Certified Specialty: Yes  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  
Provider Gender: Male  
NPI: 1285654889  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

### Anesthesiology

**Becerra Songoło, Tosh**

Provider ID: 300068  
Board Certified Specialty: No  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  
Provider Gender: Female  
NPI: 1265938724  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**Alexander, Brenton**

Provider ID: 242303  
Board Certified Specialty: No  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  
Provider Gender: Female  
NPI: 1750517306  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**Cano, Sarah**

Provider ID: 200959  
Board Certified Specialty: No  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  
Provider Gender: Female  
NPI: 1750517306  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON,
D3. 專業提供者目錄

SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
FEJLEH, ASHLEY
Provider ID: 269502
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1609353465
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
CURRAN, BRIAN
Provider ID: 239002
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1710373642
 Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 Website: N/A

ANESTHESIOLOGY
FUNDINGSLAND, BRENT
Provider ID: 280468
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831166560
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 Website: N/A

MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

ANESTHESIOLOGY
HYLTON, DIANA
Provider ID: 241735
Board Certified Specialty: Yes
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932527751
 Provider English Spoken: Y
Cultural Competency: N
MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 Website: N/A
D3. 專業提供者目錄

**ANESTHESIOLOGY**

MEYER, MEGAN  
Provider ID: 239607  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
☎ After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1720473044  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**ANESTHESIOLOGY**

MILLAR, MELISSA  
Provider ID: 201308  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (619) 543-5754  
☎ After Hours Phone: (619) 543-5754  
Provider Gender: Female  
NPI: 1417361981  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**ANESTHESIOLOGY**

NGUYEN, QUOC SY  
Provider ID: 242188  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
☎ After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1871911644  
Provider English Spoken: Y  
Provider Language(s) Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**ANESTHESIOLOGY**

OSWALD, JESSICA  
Provider ID: 239600  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
☎ After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1427315118  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**ANESTHESIOLOGY**

SHAW, SUSANNA  
Provider ID: 255316  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
☎ After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1417361981  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A
D3. 專業提供者目錄

Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1063685477
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY
SREJIC, UNA
Provider ID: 206383
Board Certified Specialty: Yes
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1588723860
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, MEDICAL CTR AT UCSF, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY
SORIA, CLAIRE
Provider ID: 243294
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1447516414
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY
SUYDAM, STEVEN
Provider ID: 286569
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386856821
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, TRI CITY MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, SHARP CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, Rady CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY
TRIVEDI, SURAJ
Provider ID: 246749
D3. Professional Provider Directory

Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1699057885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY
TULLY, JEFFREY
Provider ID: 283689
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871912493
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UC DAVIS MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY
TZENG, ERIC
Provider ID: 284577
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1801258264
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY
YODER, ANDREA
Provider ID: 272804
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1629463104
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
### D3. 專業提供者目錄

<table>
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<tr>
<th>Min/Max Age: 0\999</th>
<th>American Sign Language (ASL): N</th>
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<tbody>
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<td>Accessibility: CONTACT PROVIDER</td>
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<tr>
<td>Hours: M-F 8:00AM-5:00PM</td>
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</tr>
<tr>
<td>Website: N/A</td>
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</tbody>
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#### ANESTHESIOLOGY

**YOUNAN, LAWRENCE**

Provider ID: 240870  
Board Certified Specialty: No  
200 W ARBOR DR SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1922432475  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

#### ANESTHESIOLOGY PAIN MANAGEMENT

**DAIRO, BRANDON**

Provider ID: 299880  
Board Certified Specialty: No  
3434 MIDWAY DR STE 2001 SAN DIEGO, CA 92110  
Phone: (619) 325-1161  
Fax: (619) 325-1717  
After Hours Phone: (619) 325-1161  
Provider Gender: Male  
NPI: 1689092470  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\100  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

#### CARDIOVASCULAR DISEASE

**ALANI, ANAS**
D3. 事業提供者目錄

Provider ID: 201252
Board Certified Specialty: Yes
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1154633709
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, ARROWHEAD REGIONAL MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR, ARROWHEAD REGIONAL MEDICAL CENTER, LOS ANGELES COUNTY HARBOR UCLA MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

Provider ID: 211764
Board Certified Specialty: No
330 LEWIS ST FL 3
SAN DIEGO, CA 92103
Phone: (858) 657-8530
Fax: (619) 543-2287
After Hours Phone: (858) 657-8530
Provider Gender: Male
NPI: 1013059286
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE
CASTELLANOS, LUIS
Provider ID: 303447
Board Certified Specialty: No
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Male
NPI: 1962899823
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
Website: N/A

CARDIOVASCULAR DISEASE
CASTELLANOS, LUIS
Provider ID: 211765
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1013059286
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
CARDIOVASCULAR DISEASE
MIZZELL, ANNA
Provider ID: 214020
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1851561021
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CARDIOVASCULAR DISEASE
PHREANER, NICHOLAS
Provider ID: 239946
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1023373040
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA

CARDIOVASCULAR DISEASE
THORNTON, UCSD MEDICAL CTR
JOLLA JOHN SALLY
PROHASKA, THOMAS
Provider ID: 299912
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861889644
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED ACUPUNCTURIST
ARELLANO, JACQUELINE
Provider ID: 304137
Board Certified Specialty: No
4910 DIRECTORS PL
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1104129485
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
### D3. 專業提供者目錄

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#### CERTIFIED ACUPUNCTURIST

**ARELLANO, JACQUELINE**  
Provider ID: 277967  
Board Certified Specialty: No  
9333 GENESSEE AVE STE 200  
SAN DIEGO, CA 92121  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1104129485  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
American Sign Language (ASL): N  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

---

#### CERTIFIED ACUPUNCTURIST

**ARELLANO, JACQUELINE**  
Provider ID: 277966  
Board Certified Specialty: No  
9909 MIRA MESA BLVD STE 200  
SAN DIEGO, CA 92131  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1104129485  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
American Sign Language (ASL): N  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

---

#### CERTIFIED ACUPUNCTURIST

**ARELLANO, JACQUELINE**  
Provider ID: 304138  
Board Certified Specialty: No  
330 LEWIS ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1104129485  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
American Sign Language (ASL): N  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

---

#### CERTIFIED ACUPUNCTURIST

**CRAFT, KEVIN**  
Provider ID: 290942  
Board Certified Specialty: No  
6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 279-0925  
Fax: (858) 633-4680  
After Hours Phone: (858) 279-0925  
Provider Gender: Male  
NPI: 1659745610  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
Accessibility: CONTACT PROVIDER  
Website: N/A
### CERTIFIED ACUPUNCTURIST

#### JULIAN, FIDES

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<td>200 W ARBOR DR</td>
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<td>SAN DIEGO, CA 92103</td>
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<tr>
<td>Phone: (800) 926-8273</td>
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#### CERTIFIED ACUPUNCTURIST

#### JULIAN, FIDES

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<tr>
<td>9909 MIRA MESA BLVD STE 200</td>
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<tr>
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#### CERTIFIED ACUPUNCTURIST

#### JULIAN, FIDES

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<td>Phone: (800) 926-8273</td>
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#### CERTIFIED ACUPUNCTURIST

#### JULIAN, FIDES

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<tr>
<td>9333 GENESEE AVE STE 200</td>
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D3. Professional Provider Directory

- Provider English Spoken: Y
- Provider Language(s): Tagalog
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**CERTIFIED ACUPUNCTURIST**

SEITZ, GRETCHEN
- Provider ID: 246474
- Board Certified Specialty: No
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18\999
- American Sign Language (ASL): N
- Provider Gender: Female
- NPI: 1396876959
- Phone: (844) 200-2426
- Fax: (858) 240-6470
- After Hours Phone: (844) 200-2426

**CERTIFIED ACUPUNCTURIST**

LAM, KHANH
- Provider ID: 295380
- Board Certified Specialty: No
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Provider Gender: Male
- NPI: 1649594979
- Phone: (619) 325-1161
- Fax: (619) 325-1717
- After Hours Phone: (619) 325-1161

**CERTIFIED NURSE PRACTITIONER**

AGUILA, YESENIA
- Provider ID: 304624
- Board Certified Specialty: No
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Provider Gender: Female
- NPI: 1245966092
- Phone: (619) 266-3332
- Fax: (619) 266-6000
- After Hours Phone: (619) 266-3332

**CERTIFIED NURSE PRACTITIONER**

ALBARRAN-SLOVIN, MELODY
- Provider ID: 299328
- Board Certified Specialty: No
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Provider Gender: Female
- NPI: 1740953249
- Phone: (619) 429-3733
- Fax: (619) 628-5550
- After Hours Phone: (619) 429-3733

The PCP's doctor group may have its own network mental health services providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require mental health services providers to obtain Blue Shield authorization before they can be covered.

To access the mental health services provider list online, please visit blueshieldca.com/fad.
American Sign Language (ASL): 🆕 Phone: (619) 645-6405
Fax: (619) 687-1067
✓ After Hours Phone: (619) 645-6405
Provider Gender: Female
NPI: 1871295493
(PDO) Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Website: N/A
CERTIFIED NURSE PRACTITIONER
BELTON, KIMBERLY
Provider ID: 302309
Board Certified Specialty: No
 dévelop 1501 IMPERIAL AVE
SAN DIEGO, CA 92101
American Sign Language (ASL): 🆕 Phone: (619) 645-6405
Fax: (619) 687-1067
✓ After Hours Phone: (619) 645-6405
Provider Gender: Female
NPI: 1871295493
(PDO) Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Website: N/A
### CERTIFIED NURSE PRACTITIONER

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<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
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<th>Hours: M-F</th>
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<td>BUI, ANH</td>
<td>304272</td>
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<td>UCSD MEDICAL CTR, UCSD LA JOLLA</td>
<td>Yes</td>
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<td>N</td>
<td>CONTACT PROVIDER</td>
<td>8:00AM-5:00PM</td>
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<td>CAMARGO-LOWTHERS,</td>
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<td>UCSD MEDICAL CTR, UCSD LA JOLLA</td>
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<td>BUENROSTRO, CHRISTINA</td>
<td>243718</td>
<td>No</td>
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<td>0\999</td>
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<td>CONTACT PROVIDER</td>
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**NOTES:**
- Your PCP’s provider network may have its own mental health service providers. Please refer to the list below for the service provider. You can directly contact these providers. Note that some services may require the mental health service provider to obtain prior authorization from Blue Shield before the service is covered.
- To view the list of mental health service providers online, please visit [blueshieldca.com/fad](http://blueshieldca.com/fad).
D3. 專業提供者目錄

NPI: 1912982539
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

CAMARGO-LOWTHERS, ANGELICA
Provider ID: 270981
Board Certified Specialty: No
8010 FROST ST STE 510
SAN DIEGO, CA 92123
Phone: (858) 637-4700
Fax: (858) 637-4701
After Hours Phone: (858) 637-4700
Provider Gender: Female
NPI: 1912982539
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE

PRACTITIONER

CAPOZZI, JENNIFER
Provider ID: 241031
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942430442
Provider English Spoken: Y
Provider Language(s): Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE

PRACTITIONER

CHAVEZ, ALEXANDRIA
Provider ID: 243357
1930
Board Certified Specialty: No
☞ 4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
☞ Phone: (800) 926-8273
☞ After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811543622
☞ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
CHOATE, BERNADETTE
Provider ID: 286369
Board Certified Specialty: No
☞ 200 W ARBOR DR
SAN DIEGO, CA 92103
☞ Phone: (800) 926-8273
Fax: (888) 539-8781
☞ After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1184173558
☞ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
COLEMAN, PAGE
Provider ID: 304288
Board Certified Specialty: No
☞ 4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
☞ Phone: (619) 280-2058
Fax: (858) 633-4682
☞ After Hours Phone: (619) 280-2058
Provider Gender: Female
NPI: 1871365312
☞ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
| Provider Name            | Provider ID | Board Certified Specialty | Hospital Affiliation | Medi-Cal Open Panel | Min/Max Age | American Sign Language (ASL): | Accessibility: CONTACT PROVIDER | Website: | Phone:          | Fax:          | After Hours Phone: | Provider Gender | NPI:         |
|-------------------------|-------------|---------------------------|----------------------|---------------------|-------------|-------------------------------|--------------------------------|---------|----------------|---------------|----------------|----------------|--------------|-------------|
| **CERTIFIED NURSE**     | **PRACTITIONER** | |                    |                      |              |                  |                          |         |                |               |                |                |              |             |
| **CONNOR, PAMELA**      | 299930      | No                        | SCRIPPS GREEN HOSPITAL | Yes                | 0-999        | N                             | CONTACT PROVIDER               | N/A     | (800) 926-8273 | (888) 539-8781 | (800) 926-8273 | Female        | 1770558967  |
| **CONNOR, CAROLINE**    | 279835      | No                        | UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR | Yes             | 0-999       | N                             | CONTACT PROVIDER               | N/A     | (800) 926-8273 | (888) 539-8781 | (800) 926-8273 | Female        | 1609081710  |
| **DAVIES, SUMMER**      | 253692      | No                        | UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR | Yes             | 0-999       | N                             | CONTACT PROVIDER               | N/A     | (800) 926-8273 | (888) 539-8781 | (800) 926-8273 | Female        | 1295238749  |
D3. 專業提供者目錄

Fax: (888) 539-8781
-after Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1679850671
-q Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA Jolla John Sally Thornton, UCSD Medical CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

CERTIFIED NURSE PRACTITIONER
DE DIOS, SARAH
Provider ID: 300051
Board Certified Specialty: No
200 W Arbor Dr
San Diego, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528632742
-q Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Chula Vista Med CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

CERTIFIED NURSE PRACTITIONER
DAVIS, JANET
Provider ID: 255796
Board Certified Specialty: No
330 Lewis St
San Diego, CA 92103
Phone: (619) 471-9250
Fax: (619) 471-9275
After Hours Phone: (619) 471-9250
Provider Gender: Female
NPI: 1164616280
-q Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

CERTIFIED NURSE PRACTITIONER
DELVECCHIO, MEGAN
Provider ID: 301725
Board Certified Specialty: No
4510 Executive Dr
San Diego, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1437662863
-q Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

CERTIFIED NURSE PRACTITIONER
DEUTSCH, KAREN
Provider ID: 247981
Board Certified Specialty: No
330 Lewis St
San Diego, CA 92103
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
CERTIFIED NURSE PRACTITIONER
DOAN, ANGELA
Provider ID: 291425
Board Certified Specialty: No

4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1639638968
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
CERTIFIED NURSE PRACTITIONER
DRISCOLL, KARRIE
Provider ID: 286345
Board Certified Specialty: No

4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396085098
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
CERTIFIED NURSE PRACTITIONER
DRISCOLL, SUSAN

1934
D3. 專業提供者目錄

Provider ID: 298968
Board Certified Specialty: No
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
📞 Phone: (619) 662-4100
Fax: (619) 758-3384
⏰ After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1477755684
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

CERTIFIED NURSE PRACTITIONER
ECLARINO, GALELEO
Provider ID: 296764
Board Certified Specialty: No
9995 CARMEL MOUNTAIN RD STE B1011
SAN DIEGO, CA 92129
📞 Phone: (844) 200-2426
Fax: (858) 240-6470
⏰ After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1518687748
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

Provider ID: 278982
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
⏰ After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1669442182
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

CERTIFIED NURSE PRACTITIONER
ERICKSON, LISA
Provider ID: 287444
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
⏰ After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1669442182
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
D3. 專業提供者目錄

Min/Max Age: 0\999
American Sign Language (ASL): N
ⓒ Accessibility: CONTACT PROVIDER
.DialogInterface: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
FELD, KEREN
Provider ID: 297672
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Provider Gender: Female
NPI: 1730835083
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Children's Hosp of Los Angeles
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
⧫ Accessibility: CONTACT PROVIDER
⧫ Website: N/A

GARTH, MELISSA
Provider ID: 274053
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689232977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD La Jolla John S. Thornton, UCSD Medical CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
⧫ Accessibility: CONTACT PROVIDER
⧫ Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM
⧫ Website: N/A

CERTIFIED NURSE PRACTITIONER
FISHER, SLOANE
Provider ID: 301585
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1538807003
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Children's Hosp of Los Angeles
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
⧫ Accessibility: CONTACT PROVIDER
⧫ Website: N/A

GIORGI, ASHLEY
Provider ID: 304877
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Provider Gender: Female
NPI: 1952174203
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
⧫ Accessibility: CONTACT PROVIDER
⧫ Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM
⧫ Website: N/A

GOMEZ, LESLIE
Provider ID: 299468
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
Min/Max Age: 0\999
American Sign Language (ASL): N
⧫ Accessibility: CONTACT PROVIDER
⧫ Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM
⧫ Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
CERTIFIED NURSE PRACTITIONER
GOMEZ, LESLIE
Provider ID: 299467
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1528578713
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
GUADARRAMA, IGNACIO
Provider ID: 262419
Board Certified Specialty: No
995 GATEWAY CENTER WAY STE 105
SAN DIEGO, CA 92102
Phone: (619) 264-1934
Fax: (619) 264-1937
After Hours Phone: (619) 264-1934
Provider Gender: Male
NPI: 1821331174
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
HA, THU
Provider ID: 293260
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1346443983
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
HA, THU
Provider ID: 293261
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
CERTIFIED NURSE PRACTITIONER
HARKNESS, RUMIKO
Provider ID: 208841
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1487785093
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
HAROUSH, GAL
Provider ID: 302475
Board Certified Specialty: No
4973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1992461230
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HART, BECKY
Provider ID: 305337
Board Certified Specialty: No
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Provider Gender: Female
NPI: 1316626344
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HEAD, KRISTIN
Provider ID: 268656
Board Certified Specialty: No
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-7484
Provider Gender: Female
NPI: 1699078923
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HILL, GENIELYN
Provider ID: 1346443983
Provider Gender: Female
NPI: 1346443983
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Website: N/A
D3. 專業提供者目錄

Provider ID: 299144
Board Certified Specialty: No
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (619) 434-1613
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1710632435
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
HOOPER, BONNIE
Provider ID: 275254
Board Certified Specialty: No
9339 GENESEE AVE STE 350
SAN DIEGO, CA 92121
Phone: (858) 454-4300
Fax: (858) 454-5088
After Hours Phone: (858) 454-4300
Provider Gender: Female
NPI: 1861956724
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
HILLIARD, THESLONICA
Provider ID: 284022
Board Certified Specialty: No
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1821062878
 Provider English Spoken: Y
 Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
HOOPER, BONNIE
Provider ID: 275255
Board Certified Specialty: No
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619) 298-9809
Provider Gender: Female
NPI: 1821062878
 Provider English Spoken: Y
 Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE
PRACTITIONER
IBARRA, MARTHA
Provider ID: 295393
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1114957289
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL
D3. Professional Providers Directory

CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 14-999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 8:30AM-5:30PM
 TU 8:30AM-8:30PM
 W 8:30AM-5:30PM
 TH 8:30AM-8:30PM
 F 8:30AM-5:30PM
 SA 9:00AM-4:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
IBARRA, MARTHA
Provider ID: 295392
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 279-0925
 Fax: (858) 633-4680
 After Hours Phone: (858) 279-0925
 Provider Gender: Female
 NPI: 1114957289
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
 SCRIPPS MERCY HOSPITAL,
 CHULA VISTA
 Medi-Cal Open Panel: Yes
 Min/Max Age: 14-999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
INSTONE, SUSAN
Provider ID: 293255
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
 Phone: (858) 810-8700
 Fax: (858) 633-4680
 After Hours Phone: (858) 810-8700
 Provider Gender: Female
 NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0-999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED NURSE PRACTITIONER
JONES, CHRISTA
Provider ID: 275563
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
 Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
 Provider Gender: Female
 NPI: 1396371431
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

CERTIFIED NURSE PRACTITIONER
INSTONE, SUSAN
Provider ID: 293254
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
 Phone: (619) 280-2058
 Fax: (858) 633-4682
 After Hours Phone: (619) 280-2058
 Provider Gender: Female
 NPI: 1710223268
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0-999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

您的PCP的医生团体可能有自己的网络内容精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
**D3. 專業提供者目錄**

<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Board Certified Specialty:</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Provider Gender</th>
<th>NPI</th>
<th>Provider Language(s)</th>
<th>Cultural Competency</th>
<th>Medi-Cal Open Panel:</th>
<th>Min/Max Age:</th>
<th>American Sign Language (ASL):</th>
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<td>KEMP, KATHRINE</td>
<td>301276</td>
<td>No</td>
<td>1501 IMPERIAL AVE SAN DIEGO, CA 92101</td>
<td>(619) 645-6405</td>
<td>(619) 687-1067</td>
<td>(619) 645-6405</td>
<td>Female</td>
<td>1316615313</td>
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<tr>
<td>KIDANE, ZINNIA</td>
<td>302427</td>
<td>No</td>
<td>7011 LINDA VISTA RD SAN DIEGO, CA 92111</td>
<td>(858) 810-8700</td>
<td>(858) 633-4680</td>
<td>(858) 810-8700</td>
<td>Female</td>
<td>1780334110</td>
<td>Vietnamese</td>
<td>N</td>
<td>Yes</td>
<td>0\999</td>
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<td>KI, TRISH</td>
<td>293293</td>
<td>No</td>
<td>7011 LINDA VISTA RD SAN DIEGO, CA 92111</td>
<td>(858) 810-8700</td>
<td>(858) 633-4680</td>
<td>(858) 810-8700</td>
<td>Female</td>
<td>1376840199</td>
<td>Spanish</td>
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<td>(858) 633-4680</td>
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<td>Female</td>
<td>1780334110</td>
<td>Vietnamese</td>
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</table>
D3. 專業提供者目錄

- **Cultural Competency:** N  
  - **Medi-Cal Open Panel:** Yes  
  - **Min/Max Age:** 0\999  
  - **American Sign Language (ASL):** N  
  - **Accessibility:** CONTACT PROVIDER  
  - **Hours:** M-F 8:00AM-5:00PM  
  - **Website:** N/A

**CERTIFIED NURSE PRACTITIONER**

**KLEMENCIC, TAHNEE**  
- Provider ID: 302628  
- Board Certified Specialty: No  
- 7910 FROST ST STE 195  
  SAN DIEGO, CA 92123  
- Phone: (858) 966-8974  
- Fax: (858) 966-6721  
- After Hours Phone: (858) 966-8974  
- Provider Gender: Female  
- NPI: 1134802283  
- Provider English Spoken: Y  
- Cultural Competency: N  
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\999  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:00AM-5:00PM  
- Website: N/A

**CULTIVATED NURSE PRACTITIONER**

**LANE, KIMBERLY**  
- Provider ID: 301600  
- Board Certified Specialty: No  
- 3444 KEARNY VILLA RD STE 201  
  SAN DIEGO, CA 92123  
- Phone: (858) 430-1101  
- Fax: (858) 221-5049  
- After Hours Phone: (858) 430-1101  
- Provider Gender: Female  
- NPI: 1457670119  
- Provider English Spoken: Y  
- Cultural Competency: N  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 0\999  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: M-F 8:00AM-5:00PM  
- Website: N/A

**CERTIFIED NURSE PRACTITIONER**

**LANE, KIMBERLY**  
- Provider ID: 301597  
- Board Certified Specialty: No  
- 11770 BERNARDO PLAZA 1942
D3. 專業提供者目錄

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<td>4060 4TH AVE STE 310</td>
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<td>(619) 234-2158</td>
<td>(619) 234-0206</td>
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<td>MAROSOK, MICHELLE</td>
<td>1690 DOVE CANYON RD STE 103</td>
<td>(858) 649-5100</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

CERTIFIED NURSE PRACTITIONER
MEDINA, RUBELETA
Provider ID: 296673
Board Certified Specialty: No
Provider English Spoken: Y Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-6:00PM F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
MENDOZA, GRETEL MARIE
Provider ID: 303202
Board Certified Specialty: No
Provider English Spoken: Y Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
MICK, SHARON
Provider ID: 299647
Board Certified Specialty: No
Provider English Spoken: Y Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
MICK, SHARON
Provider ID: 299648
Board Certified Specialty: No
Provider English Spoken: Y Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
MICK, SHARON
Provider ID: 299649
Board Certified Specialty: No
Provider English Spoken: Y Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Cultural Competency: N
Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED NURSE PRACTITIONER
MIDORO, ABEGAILLE
Provider ID: 303828
Board Certified Specialty: No
9855 ERMA RD STE 105
SAN DIEGO, CA 92131
Phone: (844) 200-2426
Fax: (858) 536-8034
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1952925851
 Provider English Spoken: Y
 Provider Language(s): Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TU 8:30AM-5:30PM
 W 10:00AM-7:00PM
 TH-F 8:30AM-5:30PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
MILLER, EVA
Provider ID: 255833
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (619) 471-9210
After Hours Phone: (619) 471-9210
Provider Gender: Female
NPI: 1043492523
 Provider English Spoken: Y
 Provider Language(s): Farsi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
MOHEBBI, ATHENA
Provider ID: 201325
Board Certified Specialty: No
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1952627176
 Provider English Spoken: Y
 Provider Language(s): Farsi
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A
D3. 專業提供者目錄

PRACTITIONER
MORAN, TIFFANY
Provider ID: 304275
Board Certified Specialty: No

2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0206
After Hours Phone: (619) 234-2158
Provider Gender: Female
NPI: 1730730649
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
NEJATI, FRESHTA
Provider ID: 214112
Board Certified Specialty: No

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1831598119
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
MULVEY, CAOILFHIONN
Provider ID: 291419
Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1184386864
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
NETZEL, JENNIFER
Provider ID: 291347
Board Certified Specialty: No

9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336896232
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
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Website: N/A

CERTIFIED NURSE PRACTITIONER
NETZEL, JENNIFER
Provider ID: 291348
Board Certified Specialty: No

8899 UNIVERSITY CENTER

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<td>Medi-Cal Open Panel: Yes</td>
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<tr>
<td>Min/Max Age: 0\999</td>
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<td>American Sign Language (ASL): N</td>
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<td>Website: N/A</td>
<td>Website: N/A</td>
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<tr>
<td>Name</td>
<td>Provider ID</td>
<td>Board Certified Specialty</td>
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<tr>
<td>OREJEL, EDITH</td>
<td>296715</td>
<td>No</td>
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<td>ORPILLA, IMELDA</td>
<td>243506</td>
<td>No</td>
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<tr>
<td>PATIAG, DANIEL</td>
<td>293248</td>
<td>No</td>
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CERTIFIED NURSE PRACTITIONER
PATIAG, DANIEL
Provider ID: 293249
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Male
NPI: 1073169769
Provider English Spoken: Y
Provider Language(s): Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
PEREZ, ALLYSSA
Provider ID: 286223
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497358915
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
PEREZ, ALLYSSA
Provider ID: 286222
Board Certified Specialty: No
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497358915
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Your PCP's doctor group may have their own network mental health providers. Please refer to the list below. You can contact these providers directly. Please note, certain services may need the mental health provider to obtain Blue Shield prior authorization before they can be covered.

To access the mental health provider list online, please visit blueshieldca.com/fad.
D3. 專業提供者目錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
PETTIS, BETH
Provider ID: 286878
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1326638958
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

RIEGO, SUZANNE
Provider ID: 214477
Board Certified Specialty: No
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Phone: (858) 292-7200
After Hours Phone: (858) 292-7200
Provider Gender: Female
NPI: 114453754
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON

RANDLE, CARRIE
Provider ID: 299296
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1558557348
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: NAVAL MEDICAL CTR SD RBE, RODY
CHILDRENS HOSPITAL SAN DIEGO

ROBERTSON, RACHAEL
Provider ID: 286940
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
D3. 專業提供者目錄

CERTIFIED NURSE PRACTITIONER
ROSCOE, SYDNEY
Provider ID: 305039
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1992448864
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
ROSCOE, SYDNEY
Provider ID: 305037
Board Certified Specialty: No
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1992448864
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
ROSS, CRYSTAL
Provider ID: 287763
Board Certified Specialty: No
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1548683378
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PROVIDER
Website: N/A
D3. 專業提供者目錄

JOHN SALLY THORNTON,
GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
After Hours Phone: (800) 926-8273
Website: N/A

CERTIFIED NURSE
PRACTITIONER
ROSSI, CATHERINE
Provider ID: 291445
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1649934126
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
ROSS, CRYSTAL
Provider ID: 302559
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Provider Gender: Female
NPI: 1548683378
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
ROZO, JOSE
Provider ID: 300037
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1528787132
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
SABIN, NANCY
Provider ID: 293288
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1285732586
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
SABIN, NANCY
Provider ID: 293287
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
D3. 專業提供者目錄

NPI: 1285732586
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**CERTIFIED NURSE PRACTITIONER**

**SAMPSON, ANDRIECE**
Provider ID: 303282
Board Certified Specialty: No
- 2630 1ST AVE
  SAN DIEGO, CA 92103
  Phone: (619) 234-2158
  Fax: (619) 234-0505
  After Hours Phone: (619) 234-2158
  Provider Gender: Female
  NPI: 1619594124
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**CERTIFIED NURSE PRACTITIONER**

**SANTANGELO, JOANNE**
Provider ID: 293285
Board Certified Specialty: No
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
  Phone: (858) 279-0925
  Fax: (858) 633-4680
  After Hours Phone: (858) 279-0925
  Provider Gender: Female
  NPI: 1619370475
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
Provider ID: 293286
Board Certified Specialty: No
- 7011 LINDA VISTA RD
  SAN DIEGO, CA 92111
  Phone: (858) 810-8700
  Fax: (858) 633-4680
  After Hours Phone: (858) 810-8700
  Provider Gender: Female
  NPI: 1225012842
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**CERTIFIED NURSE PRACTITIONER**

**SATTERWHITE, MAURINE**
Provider ID: 293258
Board Certified Specialty: No
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
  Phone: (858) 279-0925
  Fax: (858) 633-4680
  After Hours Phone: (858) 279-0925
  Provider Gender: Female
  NPI: 1225012842
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- Accessibility: CONTACT PROVIDER
- Website: N/A
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

CERTIFIED NURSE PRACTITIONER
SEARS-WILEY, ELIZABETH
Provider ID: 276851
Board Certified Specialty: No
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1215394382
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
SENA, TIFFANY
Provider ID: 300229
Board Certified Specialty: No
550 WASHINGTON ST STE 300
SAN DIEGO, CA 92103
Phone: (619) 297-5437
Fax: (619) 297-4567
 After Hours Phone: (619) 297-5437
Provider Gender: Female
NPI: 1710539523
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH
 8:00AM-8:00PM
 F 8:00AM-5:00PM
 Website: N/A

D3. 專業提供者目錄

4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 141794358
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

CERTIFIED NURSE PRACTITIONER
SENB, TOLPA
Provider ID: 256646
Board Certified Specialty: No
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 141794358
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A
D3. 專業提供者目錄

CERTIFIED NURSE PRACTITIONER
SWARTZ, ERIN
Provider ID: 255787
Board Certified Specialty: No
Address: 330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 657-8530
After Hours Phone: (858) 657-8530
Provider Gender: Female
NPI: 1639571292
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
TAING, JENNIFER
Provider ID: 201573
Board Certified Specialty: No
Address: 4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1649528357
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
TALBOT, ADRIANNE
Provider ID: 278183
Board Certified Specialty: No
Address: 4168 FRONT ST STE 1A
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1992048557
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
TONJES, ERIKA
Provider ID: 295361
Board Certified Specialty: No
Address: 3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1144614066
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
TONJES, ERIKA
Provider ID: 298019
Board Certified Specialty: No
Address: 7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1205540812
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

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D3. 專業提供者目錄

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

Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
TONJES, ERIKA
Provider ID: 298018
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-9676
Fax: (858) 633-4680
After Hours Phone: (858) 279-9676
Provider Gender: Female
NPI: 1205540812
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
TOPPEN, LAURA
Provider ID: 215477
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1326563495
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
TURNER, ELIZABETH
Provider ID: 255601
Board Certified Specialty: No
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
Phone: (858) 534-8019
After Hours Phone: (858) 534-8019
Provider Gender: Female
NPI: 1326570045
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
VIAL-POASTER, MARIA
Provider ID: 205651
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1376046680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
VILLALOBOS, REBECA
Provider ID: 294770
Board Certified Specialty: No
1809 NATIONAL AVE
SAN DIEGO, CA 92113
Phone: (619) 515-2300
Fax: (619) 515-2510
After Hours Phone: (619) 515-2300
Provider Gender: Female
NPI: 1184224396
Provider English Spoken: Y
Provider Language(s)
D3. 專業提供者目錄

Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
VILLALOBOS, REBECA
Provider ID: 294769
Board Certified Specialty: No
823 GATEWAY CENTER WAY
SAN DIEGO, CA 92102
Phone: (619) 515-2300
After Hours Phone: (619) 515-2300
Provider Gender: Female
NPI: 1184224396
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\199
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
WHITEHURST, UNIQUE
Provider ID: 306075
Board Certified Specialty: No
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 428-7952
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1124800214
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
WOO, ANDY
Provider ID: 299916
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1609450550
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE PRACTITIONER
YEO, ALEXANDRIA
Provider ID: 299941
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
D3. 專業提供者目錄

NPI: 1902368319
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST
ALFONSO, ALVIN
Provider ID: 256374
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1952653404
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST
AMADOR, LINDSAY
Provider ID: 291388
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003556184
Provider English Spoken: Y
Cultural Competency: N
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST
APPLEGET, JOSEPH
Provider ID: 239602
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1174893358
Provider English Spoken: Y
Cultural Competency: N
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST
BARBA, ARNEL
Provider ID: 262186
Board Certified Specialty: No
286 EUCLID AVE STE 109
SAN DIEGO, CA 92114
Phone: (619) 564-8249
Fax: (619) 564-8249
Provider Gender: Male
NPI: 1750366928
Provider English Spoken: Y
Provider Language(s) Spoken: Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED
NURSE ANESTHETIST
BAYLIS, CHRISTOPHER
Provider ID: 240763
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1174893358

D3. Professional Provider Directory

- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

**CERTIFIED REGISTERED NURSE ANESTHETIST**

BILLINGTON, KATHERINE

Provider ID: 262246
Board Certified Specialty: No
286 EUCLID AVE STE 109
SAN DIEGO, CA 92114
Phone: (619) 564-8249
After Hours Phone: (619) 564-8249
Provider Gender: Female
NPI: 1962787366

- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

**CERTIFIED REGISTERED NURSE ANESTHETIST**

BOEING, KRISTINA

Provider ID: 274397
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1205134301

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

**CERTIFIED REGISTERED NURSE ANESTHETIST**

DOLLAND, STEVEN

Provider ID: 280552
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982059044

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: KERN MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

**CERTIFIED REGISTERED NURSE ANESTHETIST**

FERRITER, STACY

Provider ID: 265295
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1023194560

- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM
- Website: N/A

For your PCP's patient directory, they may have their own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, certain services may require your mental health service provider to obtain Blue Shield prior authorization before being covered.

If you want to access the mental health service provider list online, please visit blueshieldca.com/fad.
D3. 專業提供者目錄

Fax: (888) 539-8781  
Provider Gender: Female  
NPI: 1780725556  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
GONZALEZ, LISA  
Provider ID: 299905  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1083254205  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UNIVERSITY OF CALIFORNIA IRVINE MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
GARCIA, CALVIN  
Provider ID: 217365  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1427419944  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
POLIKOWSKI, SAMANTHA  
Provider ID: 291404  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1194134114  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

CERTIFIED REGISTERED NURSE ANESTHETIST
RAMIREZ, NICOLE  
Provider ID: 291444  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1487213500  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A
SACKS, BRENT  
Provider ID: 278003  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1982133591  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

CERTIFIED REGISTERED NURSE MIDWIFE  
CHOI, NATHALIE  
Provider ID: 301715  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1073241618  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

CERTIFIED REGISTERED NURSE MIDWIFE  
CHOI, NATHALIE  
Provider ID: 301714  
Board Certified Specialty: No  
4168 FRONT ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1073241618  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

CERTIFIED REGISTERED NURSE MIDWIFE  
EKHOLM, JANNA  
Provider ID: 290584  
Board Certified Specialty: No  
4290 POLK AVE  
SAN DIEGO, CA 92105  
Phone: (619) 563-0250  
Fax: (858) 633-4681  
After Hours Phone: (619) 563-0250  
Provider Gender: Female  
NPI: 1588977151  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  

1961
D3. 專業提供者目錄

N

Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE
GOODWIN, RACHEL
Provider ID: 210018
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1518274919
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE
GREAR MANN, MELISSA
Provider ID: 210053
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255384475
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED REGISTERED NURSE MIDWIFE
GUNTHER, HOPE
Provider ID: 210041
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1285667741
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED REGISTERED
NURSE MIDWIFE
HIRSCH, JENNIFER
Provider ID: 210058
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1891752069
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED REGISTERED
NURSE MIDWIFE
HIRSCH, JENNIFER
Provider ID: 210054
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235670977
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED
NURSE MIDWIFE
NATHAN, CARLY
Provider ID: 301047
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235670977
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED REGISTERED
NURSE MIDWIFE
NATHAN, CARLY
Provider ID: 301048
Board Certified Specialty: No
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1235670977
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
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*Your PCP’s doctor group may have its own network mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, certain services may require prior authorization from the mental health service provider to be covered by Blue Shield. To get a list of mental health service providers online, please visit blueshieldca.com/fad.*
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<th>Provider ID</th>
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<td>Yes</td>
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<td>N</td>
<td>CONTACT</td>
<td>M-F</td>
<td>N/A</td>
</tr>
</tbody>
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**CERTIFIED REGISTERED NURSE MIDWIFE**

**PERDION, KAREN**

Provider ID: 210134
Board Certified Specialty: No
4168 FRONT ST
SANDIEGO, CA 92103
Phone: (619) 543-7878
Fax: (619) 543-2366
After Hours Phone: (619) 543-7878
Provider Gender: Female
NPI: 1518916857
Provider English Spoken: N
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR

**CHIROPRACTOR**

**BUI, MAI**

Provider ID: 295791
Board Certified Specialty: No
5354 UNIVERSITY AVE STE 3
SAN DIEGO, CA 92105
Phone: (619) 692-3211
Fax: (619) 640-3211
After Hours Phone: (619) 692-3211
Provider Gender: Female
NPI: 1780901264
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N

**BUI, MAI**

Provider ID: 289496
Board Certified Specialty: No
10717 CAMINO RUIZ STE 137
SAN DIEGO, CA 92126
Phone: (619) 692-3211
Fax: (619) 640-3211
After Hours Phone: (619) 692-3211
Provider Gender: Female

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**D3. 專業提供者目錄**

Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**CHIROPRACTOR**
**BUI, MAI**

Provider ID: 125052
Board Certified Specialty: No
5354 UNIVERSITY AVE STE 3
SAN DIEGO, CA 92105
Phone: (619) 692-3211
Fax: (619) 640-3211
After Hours Phone: (619) 692-3211
Provider Gender: Female
NPI: 1780901264
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N

**CHIROPRACTOR**
**BUI, MAI**

Provider ID: 289496
Board Certified Specialty: No
10717 CAMINO RUIZ STE 137
SAN DIEGO, CA 92126
Phone: (619) 692-3211
Fax: (619) 640-3211
After Hours Phone: (619) 692-3211
Provider Gender: Female
D3. 專業提供者目錄

NPI: 1780901264
- Provider English Spoken: Y
- Provider Language(s): Vietnamese
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N

Provider ID: 291546
- Board Certified Specialty: No
- 9995 CARMEL MOUNTAIN RD STE D
  SAN DIEGO, CA 92129
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N

Provider ID: 269883
- Board Certified Specialty: No
- 4419 EUCLID AVE STE 105
  SAN DIEGO, CA 92115
- Phone: (619) 287-1235
  Fax: (619) 255-6406
- After Hours Phone: (619) 287-1235
- Provider Gender: Male

NPI: 1841557733
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N

Provider ID: 291547
- Board Certified Specialty: No
- 10737 CAMINO RUIZ STE 235
  SAN DIEGO, CA 92126
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Spanish

CHIROPRACTOR

CASTRO, DAVID
Provider ID: 293322
- Board Certified Specialty: No
- 1016 OUTER RD
  SAN DIEGO, CA 92154
- Phone: (619) 429-3733
  Fax: (619) 628-5550
- After Hours Phone: (619) 429-3733
- Provider Gender: Male

NPI: 1841557733
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N

Provider ID: 291546
- Board Certified Specialty: No
- 9995 CARMEL MOUNTAIN RD STE D
  SAN DIEGO, CA 92129
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Spanish

CHIROPRACTOR

GILBERTO, JOSEPH
Provider ID: 291547
- Board Certified Specialty: No
- 10737 CAMINO RUIZ STE 235
  SAN DIEGO, CA 92126
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Vietnamese

CHIROPRACTOR

GILIBERTO, JOSEPH
Provider ID: 291546
- Board Certified Specialty: No
- 9995 CARMEL MOUNTAIN RD STE D
  SAN DIEGO, CA 92129
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Spanish

CHIROPRACTOR

LUU, DANIEL
Provider ID: 269883
- Board Certified Specialty: No
- 4419 EUCLID AVE STE 105
  SAN DIEGO, CA 92115
- Phone: (619) 287-1235
  Fax: (619) 255-6406
- After Hours Phone: (619) 287-1235
- Provider Gender: Male

NPI: 1225108269
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N

CHIROPRACTOR

GILBERTO, JOSEPH
Provider ID: 291547
- Board Certified Specialty: No
- 10737 CAMINO RUIZ STE 235
  SAN DIEGO, CA 92126
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Spanish

CHIROPRACTOR

GILIBERTO, JOSEPH
Provider ID: 291546
- Board Certified Specialty: No
- 9995 CARMEL MOUNTAIN RD STE D
  SAN DIEGO, CA 92129
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Spanish

CHIROPRACTOR

GILIBERTO, JOSEPH
Provider ID: 291547
- Board Certified Specialty: No
- 10737 CAMINO RUIZ STE 235
  SAN DIEGO, CA 92126
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Spanish

CHIROPRACTOR

GILIBERTO, JOSEPH
Provider ID: 291546
- Board Certified Specialty: No
- 9995 CARMEL MOUNTAIN RD STE D
  SAN DIEGO, CA 92129
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Spanish

CHIROPRACTOR

GILIBERTO, JOSEPH
Provider ID: 291547
- Board Certified Specialty: No
- 10737 CAMINO RUIZ STE 235
  SAN DIEGO, CA 92126
- Phone: (844) 200-2426
  Fax: (619) 399-5959
- After Hours Phone: (844) 200-2426
- Provider Gender: Male

NPI: 1821463159
- Provider English Spoken: Y
- Provider Language(s): Spanish

CHIROPRACTOR
D3. 專業提供者目錄

ROBINSON, DEAN
Provider ID: 300848
Board Certified Specialty: No
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Provider Gender: Male
NPI: 300848
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM
Website: N/A

DERMATOLOGY
CALAME, ANTOANELLA
Provider ID: 290301
Board Certified Specialty: No
6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
Phone: (858) 750-2983
Fax: (858) 750-2984
After Hours Phone: (858) 750-2983
Provider Gender: Female
NPI: 1285817569
Provider English Spoken: Y
Provider Language(s) Spoken: Romanian
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA,
YUMA REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

CHIROPRACTOR
ROBINSON, DEAN
Provider ID: 300847
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 300847
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:30PM
Website: N/A

DERMATOLOGY
FABRIKANT, JORDAN
Provider ID: 262275
Board Certified Specialty: No
4060 4TH AVE STE 415
SAN DIEGO, CA 92103
Phone: (619) 298-9809
Fax: (619) 298-9823
After Hours Phone: (619) 298-9809
Provider Gender: Male
NPI: 262275
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

DERMATOLOGY
KANNAN, SWATI
Provider ID: 286287
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 286287
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED CTR, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
D3. 專業提供者目錄

THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

DERMATOLOGY
KAUNITZ, GENEVIEVE
Provider ID: 285011
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1053734905
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

KOZMA, BONITA
Provider ID: 269301
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
Phone: (858) 657-8322
Fax: (888) 539-8781
After Hours Phone: (858) 657-8322
Provider Gender: Female
NPI: 1659654598
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SHI, VERONICA
Provider ID: 286335
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366897464
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

DERMATOLOGY
SHI, VERONICA
Provider ID: 271713
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
Phone: (858) 657-8322
Fax: (888) 539-8781
After Hours Phone: (858) 657-8322
Provider Gender: Female
NPI: 1366897464
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

1967
D3. 專業提供者目錄

DERMATOLOGY
SINGH, GAURAV
Provider ID: 272612
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN STE 350
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184073801
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, USC KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
AMANN, CHRISTOPHER
Provider ID: 270913
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1134326895
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCSD LA JOLLA
KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
AUSTIN, ANDREA
Provider ID: 269291
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093161473
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
BAGBY, JESSICA
Provider ID: 271136
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811289093
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, UCSD MEDICAL CTR, UCSD LA JOLLA
KENNETH NORRIS JR CANCER HOSPITAL, KECK HOSPITAL OF USC, USC VERDUGO HILLS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Angeles General Medical Center, TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

**EMERGENCY MEDICINE**

**BARRY, JEFFREY**  
Provider ID: 271130  
Board Certified Specialty: No  
 médecis SAN DIEGO, CA 92103  
Phone: (855) 535-5864  
Fax: (888) 539-8781  
After Hours Phone: (855) 535-5864  
Provider Gender: Male  
NPI: 1801207006  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**MEDICAL CTR, UCSD LA JOLLA**  
**JOHN SALLY THORNTON**  
Provider ID: 270333  
Board Certified Specialty: No  
4520 EXECUTIVE DR STE P2  
SAN DIEGO, CA 92121  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1801206354  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**EMERGENCY MEDICINE**  
**BARRY, JEFFREY**  
Provider ID: 271132  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1801207006  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**EMERGENCY MEDICINE**  
**BARRY, JEFFREY**  
Provider ID: 271133  
Board Certified Specialty: No  
4520 EXECUTIVE DR STE P2  
SAN DIEGO, CA 92121  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1801206354  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**EMERGENCY MEDICINE**  
**BELLINGHAUSEN, AMY**  
Provider ID: 270336  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1801206354
D3. Specialty Provider Directory

- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** SHARP CORONADO HOSP AND HEALTHCARE CTR, SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 18\999
- **American Sign Language (ASL):** N

**EMERGENCY MEDICINE**

**CASTELLANO, TIFFANY**

- **Provider ID:** 301706
- **Board Certified Specialty:** No
- **Provider Gender:** Female
- **NPI:** 1063893063

**BELLINGHAUSEN, AMY**

- **Provider ID:** 270334
- **Board Certified Specialty:** No
- **Provider Gender:** Female
- **NPI:** 1801206354

**CHEN, ALICE**

- **Provider ID:** 287430
- **Board Certified Specialty:** No
- **Provider Gender:** Female
- **NPI:** 1427476597

**EMERGENCY MEDICINE**

**CASTELLANO, TIFFANY**

- **Provider ID:** 279314
- **Board Certified Specialty:** No
- **Provider Gender:** Female

**CASTELLANO, TIFFANY**

- **Provider ID:** 279314
- **Board Certified Specialty:** No
- **Provider Gender:** Female

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**Your PCP’s provider group may have their own network of mental health services providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from the mental health services provider, then the service can be covered.**

**To obtain a mental health services provider list online,** please visit **blueshieldca.com/fad**.
D3. 專業提供者目錄

**EMERGENCY MEDICINE**

**CHEN, ALICE**
Provider ID: 287428
Board Certified Specialty: No
 fruition
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427476597
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA, JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**EMERGENCY MEDICINE**

**COYNE, CHRISTOPHER**
Provider ID: 303036
Board Certified Specialty: No
 fruition
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-7051
Fax: (619) 543-3115
After Hours Phone: (619) 543-7051
Provider Gender: Male
NPI: 1043590169
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA, JOHN SALLY THORNTON, RACY CHILDRENS HOSPITAL SAN DIEGO, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**EMERGENCY MEDICINE**

**GUITTARD, JESSE**
Provider ID: 239879
Board Certified Specialty: No
 fruition
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6400
Fax: (619) 543-3115
After Hours Phone: (619) 543-6400
Provider Gender: Male
NPI: 1770979890
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**EMERGENCY MEDICINE**

**HERNANDEZ, CRISTINA**
Provider ID: 242544
Board Certified Specialty: No
 fruition
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164765046
Provider English Spoken: Y
Provider Language(s):

Website: N/A
HORNBEAK, KIRSTEN
Provider ID: 240022
Board Certified Specialty: No
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Provider English Spoken: Y
Cultural Competency: N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
HOGUE, BRENNNA
Provider ID: 301711
Board Certified Specialty: No
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Provider English Spoken: Y
Cultural Competency: N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
KUTZ, CRAIG
Provider ID: 283845
Board Certified Specialty: No
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Provider English Spoken: Y
Cultural Competency: N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
LIOTTA, BENJAMIN
Provider ID: 285630
Board Certified Specialty: No
Hospital Affiliation: UCSD MEDICAL CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Provider English Spoken: Y
Cultural Competency: N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
D3. 專業提供者目錄

MCDANIEL, MICHELE
Provider ID: 246901
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1366761959
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS
MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
MUELLER, MATTHEW
Provider ID: 280657
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6400
After Hours Phone: (619) 543-6400
Provider Gender: Male
NPI: 1871732214
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, EL CENTRO REGIONAL MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
NOSTE, ERIN
Provider ID: 239798
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (858) 605-4441
After Hours Phone: (858) 605-4441
Provider Gender: Female
NPI: 1871732214
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-10:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-10:00PM
Website: N/A

EMERGENCY MEDICINE
PARK, JAY
Provider ID: 285607
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
<table>
<thead>
<tr>
<th>Provider</th>
<th>Specialty</th>
<th>Gender</th>
<th>NPI</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>English Spoken</th>
<th>Language(s) Spoken</th>
<th>Cultural Competency</th>
<th>Accessibility</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pham, Lily</td>
<td>Emergency Medicine</td>
<td>Female</td>
<td>1811423072</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
<td>0-19</td>
<td>Y, Vietnamese</td>
<td>N</td>
<td>N</td>
<td>M-F 8:00AM-5:00PM</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sabha, Mahmoud</td>
<td>Emergency Medicine</td>
<td>Male</td>
<td>1457747883</td>
<td>UCSD Medical Center, UCSD La Jolla</td>
<td>No</td>
<td>0-19</td>
<td>Y, Spanish</td>
<td>N</td>
<td>N</td>
<td>M-F 8:00AM-5:00PM</td>
<td>N/A</td>
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<td></td>
</tr>
</tbody>
</table>

---

**D3. 专业提供者目录**

Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1366478372
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD Medical Center, UCSD La Jolla

John Sally Thornton
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**EMERGENCY MEDICINE**

Pham, Lily
- Provider ID: 304933
- Board Certified Specialty: No
- 4305 University Ave STE 150
  - San Diego, CA 92105
- Phone: (619) 280-2905
- Fax: (619) 283-1614
- After Hours Phone: (619) 280-2905
- Provider Gender: Female
- NPI: 1811423072
- Provider English Spoken: Y
- Provider Language(s): Vietnamese
- Cultural Competency: N
- Hospital Affiliation: UCSD Medical Center, UCSD La Jolla

Sabha, Mahmoud
- Provider ID: 240159
- Board Certified Specialty: No
- 16950 Via Tazon
  - San Diego, CA 92127
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1457747883
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD Medical Center, UCSD La Jolla

Rudolf, Frances
- Provider ID: 240159
- Board Certified Specialty: No
- 200 W Arbor Dr
  - San Diego, CA 92103
- Phone: (858) 657-7000
- After Hours Phone: (858) 657-7000
- Provider Gender: Female
- NPI: 1821487430
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Min/Max Age: 0-999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A
EMERGENCY MEDICINE
SLOANE, CHRISTIAN
Provider ID: 209518
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1841233145
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

EMERGENCY MEDICINE
TANAKA, HIDEAKI
Provider ID: 240124
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124280730
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EL CENTRO REGIONAL MEDICAL CENTER, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 8:00AM-8:00PM
M-F 8:00AM-5:00PM
SA 8:00AM-8:00PM
Website: N/A

EMERGENCY MEDICINE
YOU, ALAN
Provider ID: 269936
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1225425697
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
EKANAYAKE, PREETHIKA
Provider ID: 284812
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083922462
Provider English Spoken: Y
Provider Language(s) Spoken: Sinhala, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
GUERIN, CHRIS
Provider ID: 284646
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1275648875
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
JUANG, PATRICIA
Provider ID: 255605
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (858) 657-7298
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265695795
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
D3. 專業提供者目錄

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
KULASA, KRISTEN
Provider ID: 255622
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
Fax: (619) 543-6500
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932324175
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
NAGELBERG, JODI
Provider ID: 287780
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
 Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
NAGELBERG, JODI
Provider ID: 287782
Board Certified Specialty: No
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
 Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720474141
 Provider English Spoken: Y
 Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

ENDOCRINOLOGY
METABOLISM DIABETES
NAGELBERG, JODI
Provider ID: 287779
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
 Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

D3. 專業提供者目錄

**Provider Gender:** Female  
**NPI:** 1720474141  
- **Provider English Spoken:** Y  
- **Cultural Competency:** N  
- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 18\999  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  
- **Hours:** M-F 8:00AM-5:00PM  
- **Website:** N/A

**ENDOCRINOLOGY**  
**METABOLISM DIABETES**  
**TANTISIRA, LALITA**  
**Provider ID:** 286323  
**Board Certified Specialty:** No  
- **Address:** 4303 LA JOLLA VILLAGE DR STE 2110  
  SAN DIEGO, CA 92122  
- **Phone:** (800) 926-8273  
- **Fax:** (888) 539-8781  
- **After Hours Phone:** (800) 926-8273  
- **Provider Gender:** Female  
**NPI:** 1508874298  
- **Provider English Spoken:** Y  
- **Provider Language(s) Spoken:** Thai  
- **Cultural Competency:** N  
- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 0\999  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  
- **Hours:** M-F 8:00AM-5:00PM  
- **Website:** N/A

**ENDOCRINOLOGY**  
**METABOLISM DIABETES**  
**VALENCIA, KRYSTAL**  
**Provider ID:** 299363  
**Board Certified Specialty:** No  
- **Address:** 10737 CAMINO RUIZ STE 235  
  SAN DIEGO, CA 92126  
- **Phone:** (844) 200-2426  
- **Fax:** (858) 578-4417  
- **After Hours Phone:** (844) 200-2426  
- **Provider Gender:** Female  
**NPI:** 1629480272  
- **Provider English Spoken:** Y  
- **Provider Language(s) Spoken:** Spanish, Tagalog  
- **Cultural Competency:** N  
- **Hospital Affiliation:** TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL  
- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 0\999  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  
- **Hours:** M-F 8:00AM-5:00PM  
- **Website:** N/A

**ENDOCRINOLOGY**  
**METABOLISM DIABETES**  
**VALDEZ, KRYSTAL**  
**Provider ID:** 299743  
**Board Certified Specialty:** No  
- **Address:** 10737 CAMINO RUIZ STE 235  
  SAN DIEGO, CA 92126  
- **Phone:** (844) 200-2426  
- **Fax:** (858) 578-4417  
- **After Hours Phone:** (844) 200-2426  
- **Provider Gender:** Female  
**NPI:** 1629480272  
- **Provider English Spoken:** Y  
- **Provider Language(s) Spoken:** Spanish, Tagalog  
- **Cultural Competency:** N  
- **Hospital Affiliation:** TWIN CITIES COMMUNITY HOSPITAL, SIERRA VISTA REGIONAL MED CTR, PARADISE VALLEY HOSPITAL  
- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 0\999  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  
- **Hours:** M-F 8:00AM-5:00PM  
- **Website:** N/A
### FAMILY PRACTICE

#### ALVAREZ-ESTRADA, MIGUEL
**Provider ID:** 301761  
**Board Certified Specialty:** No  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 18\100  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Hours:** M-F  
* 8:00AM-5:00PM  
**Website:** N/A

#### BELL, TRACY
**Provider ID:** 304814  
**Board Certified Specialty:** No  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 18\100  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Hours:** M-F  
* 8:00AM-5:00PM  
**Website:** N/A

#### BERNADETT, ALEX
**Provider ID:** 296739  
**Board Certified Specialty:** No  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 0\999  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Hours:** M-F  
* 8:30AM-5:30PM  
**Website:** N/A

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**D3. 專業提供者目錄**

- **Medi-Cal Open Panel:** Yes  
- **Min/Max Age:** 18\100  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  
- **Hours:** M-F  
* 8:00AM-5:00PM  
- **Website:** N/A

- **Board Certified Specialty:** No  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 14\999  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Hours:** M-F  
* 8:30AM-5:30PM  
**Website:** N/A

- **Board Certified Specialty:** No  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 0\999  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Hours:** M-F  
* 8:00AM-5:00PM  
**Website:** N/A

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**Hospital Affiliation:** SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PARADISE VALLEY HOSPITAL

**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 14\999  
**American Sign Language (ASL):** N

**Hospital Affiliation:** UCSD MEDICAL CTR

**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 14\999  
**American Sign Language (ASL):** N

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**Hospital Affiliation:** UCSD MEDICAL CTR

**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 14\999  
**American Sign Language (ASL):** N

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**Hospital Affiliation:** UCSD MEDICAL CTR

**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 14\999  
**American Sign Language (ASL):** N
FAMILY PRACTICE
CAMPBELL, BRIANNA
Provider ID: 298950
Board Certified Specialty: No
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 662-4158
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1316479892
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHULA VISTA COMM HOSP
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
CHEN, ALICE
Provider ID: 207163
Board Certified Specialty: No
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265810337
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
CHEN, ALICE
Provider ID: 207164
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265810337
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

FAMILY PRACTICE
HILL, LINDA
Provider ID: 293210
Board Certified Specialty: No
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
HILL, LINDA
Provider ID: 293211
Board Certified Specialty: No
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1467434811
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
JOHN, TANNER
Provider ID: 303515
Board Certified Specialty: No
Phone: (619) 662-4100
Fax: (619) 595-0258
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1043707326
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
JOLICOEUR, MEGAN
Provider ID: 300060
Board Certified Specialty: No
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1114366192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
JOLICOEUR, MEGAN
Provider ID: 300057
Board Certified Specialty: No
Phone: (858) 249-6890
After Hours Phone: (858) 249-6890
Provider Gender: Female
NPI: 1114366192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

1981
D3. 專業提供者目錄

FAMILY PRACTICE
JOLICOEUR, MEGAN
Provider ID: 300059
Board Certified Specialty: No
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1114366192
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
JOLICOEUR, MEGAN
Provider ID: 300058
Board Certified Specialty: No
9333 GENESEE AVE
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1205848363
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
KUROSAKA, MOMO
Provider ID: 291447
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1205848363
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
KUROSAKA, MOMO
Provider ID: 291448
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1205848363
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
MCLAUGHLIN, ERIK
Provider ID: 303847
Board Certified Specialty: No
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619) 234-2158
Provider Gender: Male
NPI: 1861637217
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

FAMILY PRACTICE
PERESS, LILIA
Provider ID: 304276
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1275945446
Provider English Spoken: Y
#### D3. 專業提供者目錄

<table>
<thead>
<tr>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
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<tr>
<td>293216</td>
<td>Yes</td>
<td>SHARP MEMORIAL HOSPITAL</td>
<td>Yes</td>
<td>16\999</td>
<td>N</td>
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<td>293217</td>
<td>No</td>
<td>SHARP MEMORIAL HOSPITAL</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
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<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
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</table>

**FAMILY PRACTICE**

**PERESS, LILIA**
Provider ID: 304277
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1275945446
Provider English Spoken: Y
Provider Language(s): Ukrainian
Cultural Competency: N

**FAMILY PRACTICE**

**RISSE, JOSEPH**
Provider ID: 293216
Board Certified Specialty: Yes
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1952386765
Provider English Spoken: Y
Cultural Competency: N

**FAMILY PRACTICE**

**RISSE, JOSEPH**
Provider ID: 293217
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Male
NPI: 1952386765
Provider English Spoken: Y
Cultural Competency: N

**FAMILY PRACTICE**

**SCOTT, LAGINA**
Provider ID: 302648
Board Certified Specialty: No
292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 263-9601
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1558897009
Provider English Spoken: Y
FAMILY PRACTICE
SUMMERS-DAY, COURTNEY
Provider ID: 290976
Board Certified Specialty: Yes
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1124288873
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
VO, PHU LUONG
Provider ID: 303332
Board Certified Specialty: No
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1043849177
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
ANAND, GOBIND
Provider ID: 272837
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 328-5550
After Hours Phone: (619) 429-3733
Provider Gender: Male
NPI: 1124288873
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
SAN DIEGO, CA 92103
☎ Phone: (619) 543-2347
Fax: (858) 657-7259
☎ After Hours Phone: (619) 543-2347
Provider Gender: Male
NPI: 1861626814
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
☒ Website: N/A

GASTROENTEROLOGY
BAUMAN, LAURA
Provider ID: 260041
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-4003
Fax: (858) 560-6798
☎ After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1255697850
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
☒ Website: N/A

GASTROENTEROLOGY
ANAND, GOBIND
Provider ID: 304187
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
☎ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1861626814
☐ Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
☒ Website: N/A

GASTROENTEROLOGY
DAVE, SHRAVAN
Provider ID: 270450
Board Certified Specialty: No
4510 EXECUTIVE DR STE 7
SAN DIEGO, CA 92121
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
☎ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1588081814
☐ Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
☐ Accessibility: CONTACT PROVIDER
☒ Website: N/A

GASTROENTEROLOGY
HASAN, AWS
Provider ID: 299951
Board Certified Specialty: No
200 W ARBOR DR
### GASTROENTEROLOGY

#### HILDRETH, AMBER

**Provider ID:** 280464  
**Board Certified Specialty:** No  
**Address:** 3030 CHILDRENS WAY FL 2  
**City:** SAN DIEGO  
**State:** CA  
**Zip Code:** 92123  
**Phone:** (858) 966-4003  
**Fax:** (858) 560-6798  
**After Hours Phone:** (858) 966-4003  
**Provider Gender:** Female  
**NPI:** 1548521511  
**Provider English Spoken:** Y  
**Cultural Competency:** N  
**Hospital Affiliation:** Rady Children's Hospital San Diego  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 0-19  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Website:** N/A

#### KUMAR, SOMA

**Provider ID:** 205377  
**Board Certified Specialty:** No  
**Address:** 3030 CHILDRENS WAY FL 2 SOUTH  
**City:** SAN DIEGO  
**State:** CA  
**Zip Code:** 92123  
**Phone:** (858) 966-4003  
**Fax:** (858) 560-6798  
**After Hours Phone:** (858) 966-4003  
**Provider Gender:** Female  
**NPI:** 1356502520  
**Provider English Spoken:** Y  
**Cultural Competency:** N  
**Hospital Affiliation:** Rady Children's Hospital San Diego  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 0-19  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Hours:** M-F 8:00AM-5:00PM  
**Website:** N/A

#### NOVO, MEGAN

**Provider ID:** 296066  
**Board Certified Specialty:** No  
**Address:** 292 EUCLID AVE STE 115  
**City:** SAN DIEGO  
**State:** CA  
**Zip Code:** 92114  
**Phone:** (619) 266-3332  
**Fax:** (619) 266-6006  
**After Hours Phone:** (619) 266-3332  
**Provider Gender:** Female  
**NPI:** 1770961971  
**Provider English Spoken:** Y  
**Cultural Competency:** N  
**Hospital Affiliation:** Paradise Valley Hospital, Tri City Medical Ctr, Scripps Memorial Hospital Encinitas, UCSD La Jolla, John Sally Thornton, Scripps Mercy Hospital Chula Vista, University of California Irvine Med Ctr, UCSD Medical Ctr, UCSD Medical Ctr, Scripps Mercy Hospital  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 18-999  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Hours:** M-F 8:00AM-5:00PM  
**Website:** N/A
CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
REDDY, JOSEPH
Provider ID: 27748
Board Certified Specialty: Yes
6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120
Phone: (619) 588-4074
Fax: (619) 588-4004
After Hours Phone: (619) 588-4074
Provider Gender: Male
NPI: 1245215391
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
REDDY, JOSEPH
Provider ID: 290034
Board Certified Specialty: Yes
6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120
Phone: (619) 588-4074
Fax: (619) 588-4004
After Hours Phone: (619) 588-4074
Provider Gender: Male
NPI: 1245215391
Provider English Spoken: Y
Provider Language(s) Spoken: Hindi, Spanish, Telugu
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

GASTROENTEROLOGY
REDDY, JOSEPH
Provider ID: 304178
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 266-3332
Fax: (800) 266-6000
After Hours Phone: (800) 266-3332
Provider Gender: Female
NPI: 1073803243
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
GROSSMONT HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
### Gastroenterology

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<tr>
<td>Shah, Shailja</td>
<td>283896</td>
<td>No</td>
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<td>Y</td>
<td>N</td>
<td>UCSD Medical CTR, UCSD La Jolla, John Sally Thornton</td>
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<td>Tsai, Matthew</td>
<td>304196</td>
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<td>Y</td>
<td>N</td>
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<td>Youssef, Fady</td>
<td>304186</td>
<td>No</td>
<td>Male</td>
<td>Y</td>
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<td>UCSD Medical CTR, UCSD La Jolla, John Sally Thornton</td>
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### General Practice

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<tr>
<td>Borrero, Marcos</td>
<td>125077</td>
<td>No</td>
<td>Male</td>
<td>Y</td>
<td>N</td>
<td>Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista</td>
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D3. 專業提供者目錄

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<th>Accessibility: CONTACT PROVIDER</th>
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**Gastroenterology**

Shah, Shailja

Provider ID: 283896
Board Certified Specialty: No

- 200 W ARBOR DR
- SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- Fax: (888) 539-8781

- After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1073803243

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD Medical CTR, UCSD La Jolla, John Sally Thornton

- Medi-Cal Open Panel: Yes
- Min/Max Age: 18\999

- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Website: N/A

Youssef, Fady

Provider ID: 304186
Board Certified Specialty: No

- 6655 ALVARADO RD
- SAN DIEGO, CA 92120
- Phone: (800) 926-8273
- Fax: (888) 539-8781

- After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1265887723

- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999

- American Sign Language (ASL): N

- Accessibility: CONTACT PROVIDER
- Website: N/A

### General Practice

Borrero, Marcos

Provider ID: 125077
Board Certified Specialty: No

- 3490 PALM AVE
- SAN DIEGO, CA 92154
- Phone: (619) 423-5616
- Fax: (619) 423-5684

- After Hours Phone: (619) 423-5616

Provider Gender: Male
NPI: 1952312621

- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Hospital Affiliation: Sharp Chula Vista Med Ctr, Scripps Mercy Hospital Chula Vista

### Access to Providers

- Medi-Cal Open Panel: Yes
- Min/Max Age: 2\150

- American Sign Language (ASL): N

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1988
D3. 專業提供者目錄

N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

GENETICS CLINICAL
REIMERS, REBECCA
Provider ID: 294650
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
- After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

GENETICS MEDICAL
MARDACH, REBECCA
Provider ID: 241946
Board Certified Specialty: No
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-5840
Fax: (858) 966-5840
- After Hours Phone: (858) 966-5840
Provider Gender: Female
NPI: 1457330607
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: RONALD REAGAN UCLA MED CTR, UC DAVIS MEDICAL CTR, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

GENETICS MEDICAL
DEL CAMPO CASANELLES, MIGUEL
Provider ID: 206013
Board Certified Specialty: No
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-7484
Fax: (858) 966-4064
- After Hours Phone: (858) 966-7484
Provider Gender: Male
NPI: 1598141475
- Provider English Spoken: Y
- Provider Language(s) Spoken: French, Italian, Portuguese, Spanish
- Cultural Competency: N
- Hospital Affiliation: RONALD REAGAN UCLA MED CTR, UC DAVIS MEDICAL CTR, RADY CHILDREN'S HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

GENETICS CLINICAL
REIMERS, REBECCA
Provider ID: 302348
Board Certified Specialty: No
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-5840
Fax: (858) 966-8550
- After Hours Phone: (858) 966-5840
Provider Gender: Female
NPI: 1801207634
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

GENETICS MEDICAL
MARDACH, REBECCA
Provider ID: 241947
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<th>Board Certified Specialty: No</th>
<th>Provider ID: 268691</th>
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<td>3030 CHILDRENS WAY FL 4</td>
<td>9340 CLAIREMONT MESA</td>
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<td>SAN DIEGO, CA 92123</td>
<td>BLVD STE D</td>
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<tr>
<td>Phone: (858) 966-5840</td>
<td>SAN DIEGO, CA 92123</td>
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<td>After Hours Phone: (858)</td>
<td>Phone: (619) 583-7002</td>
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<tr>
<td>966-5840</td>
<td>Fax: (619) 583-9404</td>
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<tr>
<td>Provider Gender: Female</td>
<td>After Hours Phone: (619) 583-7002</td>
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<td>NPI: 1457330607</td>
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<td>NPI: 1063558856</td>
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<td>Hours: M-F 8:00AM-5:00PM</td>
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<td>Website: N/A</td>
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</table>

**HEARING AID DEALER / SUPPLIER**

**ANDERSON, ELAINE**

Provider ID: 268689

Board Certified Specialty: No

| 6367 ALVARADO CT STE 101   | 6367 ALVARADO CT STE 101 |
| SAN DIEGO, CA 92120        | SAN DIEGO, CA 92120     |
| Phone: (619) 583-7002      | Phone: (619) 583-7002   |
| Fax: (619) 583-9404        | Fax: (619) 583-9404     |
| After Hours Phone: (619)   | After Hours Phone: (619) |
| 583-7002                  | 583-7002               |
| Provider Gender: Female    | Provider Gender: Female |
| NPI: 1063558856            | NPI: 1902853344        |
| Provider English Spoken: Y | Provider English Spoken: Y |
| Cultural Competency: N     | Cultural Competency: N  |
| Medi-Cal Open Panel: Yes   | Medi-Cal Open Panel: Yes |
| Min/Max Age: 0\999         | Min/Max Age: 0\999     |
| American Sign Language (ASL)| American Sign Language (ASL): |
| N                          | N                     |
| Accessibility: CONTACT      | Accessibility: CONTACT |
| PROVIDER                    | PROVIDER              |
| Hours: M-F 8:00AM-5:00PM    | Hours: M-F 8:00AM-5:00PM |
| Website: N/A                | Website: N/A          |

**HEARING AID DEALER / SUPPLIER**

**DAVIS, KELLE**

Provider ID: 268653

Board Certified Specialty: No

| 9340 CLAIREMONT MESA BLVD STE D | 9340 CLAIREMONT MESA BLVD STE D |
| SAN DIEGO, CA 92123             | SAN DIEGO, CA 92123             |
| Phone: (858) 278-9911           | Phone: (858) 278-9911           |
| Fax: (858) 565-7324             | Fax: (858) 565-7324             |
| After Hours Phone: (858)        | After Hours Phone: (858)        |
| 278-9911                       | 278-9911                       |
| Provider Gender: Female         | Provider Gender: Female         |
| NPI: 1063558856                 | NPI: 1902853344                |
| Provider English Spoken: Y      | Provider English Spoken: Y      |
| Cultural Competency: N          | Cultural Competency: N          |
| Medi-Cal Open Panel: Yes        | Medi-Cal Open Panel: Yes        |
| Min/Max Age: 0\999              | Min/Max Age: 0\999              |
| American Sign Language (ASL):   | American Sign Language (ASL):   |
| N                             | N                               |
| Accessibility: CONTACT         | Accessibility: CONTACT          |
| PROVIDER                       | PROVIDER                        |
| Hours: M-F 8:30AM-5:00PM       | Hours: M-F 8:30AM-5:00PM        |
| Website: N/A                   | Website: N/A                    |

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Your PCP’s doctors’ group may have its own network of mental health providers. Please refer to the list below. You can contact these providers directly. Please note that some services may need to be pre-approved by the mental health provider before they can be covered.

To access the mental health provider list online, please visit blueshieldca.com/fad.
<table>
<thead>
<tr>
<th>HEMATOLOGY / ONCOLOGY</th>
<th>Provider Name</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
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<th>Provider Gender</th>
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<tbody>
<tr>
<td>CHEN, YU-WEI</td>
<td>303059</td>
<td>No</td>
<td>200 W ARBOR DR SAN DIEGO, CA 92103</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>UCSD</td>
<td>Male</td>
<td>1245694801</td>
<td>Y, N</td>
<td>Rady Childrens Hospital San Diego</td>
</tr>
<tr>
<td>LEE, KAREN</td>
<td>284165</td>
<td>No</td>
<td>3010 CHILDRENS WAY FL 2 SAN DIEGO, CA 92123</td>
<td>(858) 966-5811</td>
<td>(858) 966-8035</td>
<td>(858) 966-5811</td>
<td>UCSD</td>
<td>Female</td>
<td>1518352970</td>
<td>Y, N</td>
<td>Loma Linda University Medical Ctr</td>
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<tr>
<td>NGUYEN, ANTHONY</td>
<td>301060</td>
<td>No</td>
<td>16950 VIA TAZON SAN DIEGO, CA 92127</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>UCSD</td>
<td>Male</td>
<td>1295153575</td>
<td>Y, N</td>
<td>Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr</td>
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<td>PAUL, MEGAN</td>
<td>274499</td>
<td>No</td>
<td>3010 CHILDRENS WAY STE 2W SAN DIEGO, CA 92123</td>
<td>(858) 966-5811</td>
<td>(858) 966-5811</td>
<td>(858) 966-5811</td>
<td>UCSF</td>
<td>Female</td>
<td>1861810830</td>
<td>Y, N</td>
<td>Ucsd La Jolla John Sally Thornton, Ucsd Medical Ctr</td>
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</table>
HEMATOLOGY / ONCOLOGY

ZHOU, JENNY
Provider ID: 273188
Board Certified Specialty: No
Provider ID: 273188
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811200652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INFECTIOUS DISEASE

ALDOUS, JEANNETTE
Provider ID: 290420
Board Certified Specialty: No
Provider ID: 290420
Phone: (619) 662-4100
Fax: (619) 205-6384
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1811200652
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INFECTIONIOUS DISEASE

BAMFORD, LAURA
Provider ID: 276546
Board Certified Specialty: No
Provider ID: 276546
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1811200652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INFECTIONIOUS DISEASE
HORTON, LUCY
Provider ID: 240887
Board Certified Specialty: No
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INFECTIONIOUS DISEASE
DEISS, ROBERT
Provider ID: 258330
Board Certified Specialty: No
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (619) 543-3995
After Hours Phone: (619) 543-3995
Provider Gender: Male
NPI: 1194977652
Provider English Spoken: Y
Provider Language(s)
Spoken: Portuguese, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

INFECTIONIOUS DISEASE
MARTIN, THOMAS
Provider ID: 277226
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
Provider Gender: Male
NPI: 1093193583
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
INFECTIONOUS DISEASE
MARTIN, THOMAS
Provider ID: 277225
Board Certified Specialty: No
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (619) 543-5890
Fax: (888) 539-8781
After Hours Phone: (619) 543-5890
Provider Gender: Male
NPI: 1093193583
Provider English Spoken: N
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INFECTIONOUS DISEASE
MOODLEY, AMARAN
Provider ID: 208558
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (885) 966-7785
Fax: (858) 966-8658
After Hours Phone: (885) 966-7785
Provider Gender: Female
NPI: 1942478524
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS ANGELES, HOLLYWOOD PRESBYTERIAN MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INFECTIONOUS DISEASE
PANNARAJ, PIA
Provider ID: 301026
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Female
NPI: 1942478524
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INFECTIONOUS DISEASE
PROMER, KATHERINE
Provider ID: 258545
Board Certified Specialty: No
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1306280607
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INFECTIONOUS DISEASE
RAJAGOPAL, AMUTHA
Provider ID: 221088
Board Certified Specialty: No
4168 FRONT ST FL 3
SAN DIEGO, CA 92103
D3. 專業提供者目錄

Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1124465745
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**INFECTIOUS DISEASE**

TOVAR PADUA, LEIDY
Provider ID: 205357
Board Certified Specialty: No
3030 CHILDREN'S WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-7785
Fax: (858) 966-8658
After Hours Phone: (858) 966-7785
Provider Gender: Female
NPI: 1033491311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, CHILDREN'S HOSP OF LOS ANGELES, LONG BEACH MEMORIAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**INFECTIOUS DISEASE**

TOVAR PADUA, LEIDY
Provider ID: 265093
Board Certified Specialty: No
3020 CHILDREN'S WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1033491311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, CHILDREN'S HOSP OF LOS ANGELES, LONG BEACH MEMORIAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**INTERNAL MEDICINE**

ARUTYUNOV, BORIS
Provider ID: 201910
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 471-9186
Fax: (619) 471-8882
After Hours Phone: (619) 471-9186
Provider Gender: Male
NPI: 1144562703
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: N
Hospital Affiliation: GOOD SAMARITAN HOSPITAL, PIH HEALTH GOOD SAMARITAN HOSPITAL, SUTTER MEDICAL CENTER SACRAMENTO, UCSD

**INFECTIOUS DISEASE**

TOVAR PADUA, LEIDY
Provider ID: 265093
Board Certified Specialty: No
3020 CHILDREN'S WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1033491311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, CHILDREN'S HOSP OF LOS ANGELES, LONG BEACH MEMORIAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**INFECTIOUS DISEASE**

TOVAR PADUA, LEIDY
Provider ID: 265093
Board Certified Specialty: No
3020 CHILDREN'S WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1033491311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, CHILDREN'S HOSP OF LOS ANGELES, LONG BEACH MEMORIAL MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldcatjesa.com/fad。
LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
BALL, SHELDON
Provider ID: 294137
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1689646275
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 8:30AM-8:30PM
W-F 8:30AM-5:30PM
SA 9:00AM-4:00PM
Website: N/A

INTERNAL MEDICINE
BORDIN-WOSK, TALYA
Provider ID: 273983
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (760) 471-9186
Fax: (619) 543-8255
After Hours Phone: (760) 471-9186
Provider Gender: Female
NPI: 1801184973
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERNAL MEDICINE
DJEKIC, KRISTINA
Provider ID: 286668
Board Certified Specialty: No
200 W ARBOR DR
D3. 專業提供者目錄

 INTERNAL MEDICINE
 GRUNVALD, EDUARDO
 Provider ID: 286344
 Board Certified Specialty: No
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18|999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

 INTERNAL MEDICINE
 HASTIE, ELIZABETH
 Provider ID: 291431
 Board Certified Specialty: No
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 18|999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A
D3. 專業提供者目錄

NPI: 1154818797
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

INTERNAL MEDICINE

HOGARTH, MICHAEL
Provider ID: 214386
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1225019193
- Provider English Spoken: Y
- Provider Language(s) Spoken: Portuguese, Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON, UCSD MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

JABBOUR, MOUSSA
Provider ID: 256659
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1255741633
- Provider English Spoken: Y
- Provider Language(s) Spoken: Arabic
- Cultural Competency: N
- Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

INTERNAL MEDICINE

JANG, JUN
Provider ID: 291415
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1447792171
- Provider English Spoken: Y
- Cultural Competency: N

INTERNAL MEDICINE

KATZ, YISRAEL
Provider ID: 272936
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1730507872
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

INTERNAL MEDICINE

KVIATKOVSKY, MILLA
Provider ID: 274003
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Provider Gender: Female
- NPI: 1366855355
D3. Professional Provider Directory

- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Finnish, French, Hebrew, Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR, UCSD LA JOLLA

**JOHN SALLY THORNTON**
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 18-999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A

**INTERNAL MEDICINE**

**LAGO HERNANDEZ, CARLOS**
- **Provider ID:** 238622
- **Board Certified Specialty:** No
- **Address:** 200 W ARBOR DR
  SAN DIEGO, CA 92103
- **Phone:** (800) 926-8273
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Male
- **NPI:** 1558756270
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR

**LEVERONE, NICHOLAS**
- **Provider ID:** 272692
- **Board Certified Specialty:** No
- **Address:** 200 W ARBOR DR
  SAN DIEGO, CA 92103
- **Phone:** (800) 926-8273
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Male
- **NPI:** 1407388564
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR, UCSD LA JOLLA

**LAM, MICHAEL**
- **Provider ID:** 274411
- **Board Certified Specialty:** No
- **Address:** 4168 FRONT ST
  SAN DIEGO, CA 92103
- **Phone:** (800) 926-8273
- **Fax:** (888) 539-8781
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Male
- **NPI:** 1578974259
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Mandarin
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR

**LAM, MICHAEL**
- **Provider ID:** 274410
- **Board Certified Specialty:** No
- **Address:** 4520 EXECUTIVE DR STE P2
  SAN DIEGO, CA 92121
- **Phone:** (800) 926-8273
- **Fax:** (888) 539-8781
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Male
- **NPI:** 1578974259
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Mandarin
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR

**LEVERONE, NICHOLAS**
- **Provider ID:** 272692
- **Board Certified Specialty:** No
- **Address:** 200 W ARBOR DR
  SAN DIEGO, CA 92103
- **Phone:** (800) 926-8273
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Male
- **NPI:** 1407388564
- **Provider English Spoken:** Y
- **Provider Language(s):** Spoken: Spanish
- **Cultural Competency:** N
- **Hospital Affiliation:** UCSD MEDICAL CTR, UCSD LA JOLLA

**THORNTON, UCSD MEDICAL CTR**
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 18-999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A
D3. Professional Provider Directory

- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A

**INTERNAL MEDICINE MAJITHIA, AMIT**
Provider ID: 255882
Board Certified Specialty: No
Address: 4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598261091
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**INTERNAL MEDICINE MUNCE, DANIELLE**
Provider ID: 272577
Board Certified Specialty: No
Address: 200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1740644509
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**INTERNAL MEDICINE NAIDZIONAK, ULADZISLAV**
Provider ID: 290567
Board Certified Specialty: No
Address: 7930 FROST ST STE 405
SAN DIEGO, CA 92123
Phone: (858) 237-0572
After Hours Phone: (858) 237-0572
Provider Gender: Male
NPI: 1023246212
Provider English Spoken: Y
Provider Language(s): Russian
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**INTERNAL MEDICINE NOKES, BRANDON**
Provider ID: 287582
Board Certified Specialty: No
Address: 200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
D3. 專業提供者目錄

NPI: 1487040051
☑ Provider English Spoken: Y
☑ Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18 \ 999
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
☑ Hours: M-F
8:00AM-5:00PM
☑ Website: N/A

INTERNAL MEDICINE
SHAHATTO, LOBNA
Provider ID: 201324
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
☒ Phone: (858) 657-7000
☒ After Hours Phone: (858) 657-7000
Provider Gender: Female
NPI: 1477879906
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
☑ Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18 \ 999
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
☑ Hours: M-F
8:00AM-5:00PM
☐ Website: N/A

INTERNAL MEDICINE
SEBASKY, MEGHAN
Provider ID: 273962
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
☒ Phone: (619) 543-6222
Fax: (619) 543-8255
☒ After Hours Phone: (619) 543-6222
Provider Gender: Female
NPI: 1538351408
☑ Provider English Spoken: Y
☑ Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 18 \ 999
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
☑ Hours: M-F
8:00AM-5:00PM
☑ Website: N/A

INTERNAL MEDICINE
SMITH, CHELSEY
Provider ID: 239920
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
☒ Phone: (858) 657-6110
☒ After Hours Phone: (858) 657-6110
Provider Gender: Female
NPI: 1013264506
☑ Provider English Spoken: Y
☑ Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18 \ 999
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
☑ Hours: M-F
8:00AM-5:00PM
☐ Website: N/A
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<th>Specialization</th>
<th>Name</th>
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<th>Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Fax</th>
<th>Provider Gender</th>
<th>NPI</th>
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<th>Age</th>
<th>ASL</th>
<th>Provider Language(s)</th>
<th>Hospital Affiliation</th>
<th>Website</th>
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<tbody>
<tr>
<td>Internal Medicine</td>
<td>Tantisira, Lalita</td>
<td>275927</td>
<td>No</td>
<td></td>
<td>16950 Via Tazon, San Diego, CA 92127</td>
<td>(800) 926-8273</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>Female</td>
<td>1508874298</td>
<td>Yes</td>
<td>18\999</td>
<td>No</td>
<td>Thai</td>
<td>UCSD Medical Center</td>
<td>N/A</td>
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<tr>
<td>Internal Medicine</td>
<td>Thomas, Robert</td>
<td>238929</td>
<td>Yes</td>
<td></td>
<td>200 W Arbor Dr, San Diego, CA 92103</td>
<td>(800) 926-8273</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>Male</td>
<td>1053765909</td>
<td>Yes</td>
<td>18\999</td>
<td>No</td>
<td>N</td>
<td>Scripps Green Hospital</td>
<td>N/A</td>
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<tr>
<td>Internal Medicine</td>
<td>Taylor, David</td>
<td>274469</td>
<td>No</td>
<td></td>
<td>200 W Arbor Dr, San Diego, CA 92103</td>
<td>(800) 926-8273</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>Male</td>
<td>1033572995</td>
<td>Yes</td>
<td>18\999</td>
<td>No</td>
<td>N</td>
<td>UCSD Medical Center</td>
<td>N/A</td>
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<td>Internal Medicine</td>
<td>Wang, Angela</td>
<td>259534</td>
<td>No</td>
<td></td>
<td>4520 Executive Dr Ste P2, San Diego, CA 92127</td>
<td>(855) 355-5864</td>
<td>(855) 355-5864</td>
<td>(888) 539-8781</td>
<td>Female</td>
<td>1730133976</td>
<td>Yes</td>
<td>18\999</td>
<td>No</td>
<td>N</td>
<td>Scripps Medical Center</td>
<td>N/A</td>
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<tr>
<td>Provider ID</td>
<td>Provider Name</td>
<td>Gender</td>
<td>NPI</td>
<td>Hospital Affiliation</td>
<td>Medi-Cal Open Panel</td>
<td>Min/Max Age</td>
<td>American Sign Language (ASL):</td>
<td>Accessibility: CONTACT PROVIDER</td>
<td>Hours: M-F</td>
<td>Website: N/A</td>
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<tr>
<td>272681</td>
<td>WEBSTER, LUKE</td>
<td>Male</td>
<td></td>
<td>UCSD MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
<td>Yes</td>
<td>18\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>8:00AM-5:00PM</td>
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<tr>
<td>283026</td>
<td>YANG, JENNY</td>
<td>Female</td>
<td></td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
<td>Yes</td>
<td>18\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>8:00AM-5:00PM</td>
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<tr>
<td>283027</td>
<td>YANG, JENNY</td>
<td>Female</td>
<td></td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
<td>Yes</td>
<td>18\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>8:00AM-5:00PM</td>
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<tr>
<td>272657</td>
<td>ZHANG, SHERRY</td>
<td>Female</td>
<td></td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
<td>Yes</td>
<td>18\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>8:00AM-5:00PM</td>
<td>N/A</td>
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</tr>
</tbody>
</table>
D3. 專業提供者目錄

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

- Provider ID: 247292
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1447351085

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: MERCY GENERAL HOSPITAL
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

- Provider ID: 300061
- Board Certified Specialty: No
- 3020 CHILDRENS WAY
  SAN DIEGO, CA 92123
- Phone: (858) 966-5855
- Fax: (858) 966-7903
- After Hours Phone: (858) 966-5855
- Provider Gender: Male
- NPI: 1477084283

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP CHULA VISTA MED CTR,
  Adventist Health and Rideout
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

- Provider ID: 302987
- Board Certified Specialty: No
- 6402 EL CAJON BLVD STE 102
  SAN DIEGO, CA 92120
- Phone: (619) 616-2100
- Fax: (619) 616-2104
- After Hours Phone: (619) 616-2100
- Provider Gender: Male
- NPI: 1831393289

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish, Swahili
- Cultural Competency: N
- Hospital Affiliation: CHILDRENS HOSPITAL ORANGE COUNTY, RADY
  CHILDRENS HOSPITAL SAN DIEGO
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

- Provider ID: 302987
- Board Certified Specialty: No
- 6402 EL CAJON BLVD STE 102
  SAN DIEGO, CA 92120
- Phone: (619) 616-2100
- Fax: (619) 616-2104
- After Hours Phone: (619) 616-2100
- Provider Gender: Male
- NPI: 1831393289

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: CHILDRENS HOSPITAL ORANGE COUNTY, RADY
  CHILDRENS HOSPITAL SAN DIEGO
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

- Provider ID: 302987
- Board Certified Specialty: No
- 6402 EL CAJON BLVD STE 102
  SAN DIEGO, CA 92120
- Phone: (619) 616-2100
- Fax: (619) 616-2104
- After Hours Phone: (619) 616-2100
- Provider Gender: Male
- NPI: 1831393289

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: CHILDRENS HOSPITAL ORANGE COUNTY, RADY
  CHILDRENS HOSPITAL SAN DIEGO
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

- Provider ID: 302987
- Board Certified Specialty: No
- 6402 EL CAJON BLVD STE 102
  SAN DIEGO, CA 92120
- Phone: (619) 616-2100
- Fax: (619) 616-2104
- After Hours Phone: (619) 616-2100
- Provider Gender: Male
- NPI: 1831393289

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: CHILDRENS HOSPITAL ORANGE COUNTY, RADY
  CHILDRENS HOSPITAL SAN DIEGO
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

- Provider ID: 302987
- Board Certified Specialty: No
- 6402 EL CAJON BLVD STE 102
  SAN DIEGO, CA 92120
- Phone: (619) 616-2100
- Fax: (619) 616-2104
- After Hours Phone: (619) 616-2100
- Provider Gender: Male
- NPI: 1831393289

- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: CHILDRENS HOSPITAL ORANGE COUNTY, RADY
  CHILDRENS HOSPITAL SAN DIEGO
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A
D3. Professional Provider Directory

SAN DIEGO, CA 92115
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
NPI: 1154323996
Provider English Spoken: Y
Provider Language(s)
  Spoken: Bulgarian, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
  MERCY HOSPITAL,
  GROSSMONT HOSPITAL,
  ALVARADO COMMUNITY
  HOSPITAL, SHARP MEMORIAL
  HOSPITAL, SCRIPPS
  MEMORIAL HOSPITAL,
  ALVARADO HOSPITAL LLC,
  SHARP CHULA VISTA MED
  CTR, SHARP CHULA VISTA
  MED CTR, TRI CITY MEDICAL
  CTR, SCRIPPS MERCY
  HOSPITAL CHULA VISTA, Sharp
  Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
  9:00AM-5:00PM
Website: N/A

INTERVENTIONAL
CARDIOLOGY
SHEREV, DIMITRI
Provider ID: 301306
Board Certified Specialty: No

6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
Phone: (619) 582-4490
Fax: (619) 582-4737
After Hours Phone: (619) 582-4490
Provider Gender: Male
NPI: 1154323996
Provider English Spoken: Y
Provider Language(s)
  Spoken: Bulgarian, Russian, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS
  MERCY HOSPITAL,
  GROSSMONT HOSPITAL,
  ALVARADO COMMUNITY
  HOSPITAL, SHARP MEMORIAL
  HOSPITAL, SCRIPPS
  MEMORIAL HOSPITAL,
  ALVARADO HOSPITAL LLC,
  SHARP CHULA VISTA MED
  CTR, SHARP CHULA VISTA
  MED CTR, TRI CITY MEDICAL
  CTR, SCRIPPS MERCY
  HOSPITAL CHULA VISTA, Sharp
  Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
  8:00AM-5:00PM
Website: N/A

INTERVENTIONAL
CARDIOLOGY
SUDHAKAR, DEEPTHI
Provider ID: 295844
Board Certified Specialty: No

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Female
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
  Grossmont Hospital, SHARP
  CHULA VISTA MED CTR
  Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
  8:00AM-5:00PM
Website: N/A

INTERVENTIONAL
CARDIOLOGY
SUDHAKAR, DEEPTHI
Provider ID: 296050
Board Certified Specialty: No

292 EUCLID AVE STE 210
SAN DIEGO, CA 92114
Phone: (619) 616-2100
Fax: (619) 616-2104
After Hours Phone: (619) 616-2100
Provider Gender: Female
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp
  Grossmont Hospital, SHARP

2005
D3. 專業提供者目錄

CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 15\99
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
  8:00AM-5:00PM
 Website: N/A

LICENSED PROFESSIONAL CLINICAL COUNSELOR
GARCIA, JENNI
Provider ID: 299310
Board Certified Specialty: No
3025 BEYER BLVD
SAN DIEGO, CA 92154
 Phone: (619) 662-4100
Fax: (619) 662-4119
 After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1437775863
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
  8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE
ADAMI, REBECCA
Provider ID: 272670
Board Certified Specialty: No
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1992149447
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
  8:00AM-5:00PM
 Website: N/A

LICENSED PROFESSIONAL CLINICAL COUNSELOR
NAKAMURA, TIFFANY
Provider ID: 239584

Board Certified Specialty: No
4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
 Phone: (858) 534-8019
After Hours Phone: (858) 534-8019
Provider Gender: Female
NPI: 1356846349
 Provider English Spoken: Y
 Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
  8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE
ADAMI, REBECCA
Provider ID: 277179
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
 Phone: (858) 966-6710
Fax: (858) 966-6711
 After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1992149447
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
  8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL
## D3. 專業提供者目錄

### MEDICINE

**EMERUWA, UKACHI**

Provider ID: 300012  
Board Certified Specialty: No  
Address: 4168 FRONT ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1245627421  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

### MATERNAL AND FETAL MEDICINE

**EMERUWA, UKACHI**

Provider ID: 300011  
Board Certified Specialty: No  
Address: 16950 VIA TAZON  
SAN DIEGO, CA 92127  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1245627421  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

### MEDICINE

**LAURENT, LOUISE**

Provider ID: 208640  
Board Certified Specialty: No  
Address: 4168 FRONT ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1770532707  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

### MEDICINE

**MCCULLOUGH, DEIRDRE**

Provider ID: 210034  
Board Certified Specialty: No  
Address: 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123  
Phone: (858) 966-6710  
Fax: (858) 939-4102  
After Hours Phone: (858) 966-6710  
Provider Gender: Female  
NPI: 1639153018  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

## Accessibility

- **CONTACT PROVIDER**  
- **Website:** N/A

**MERCY HOSPITAL, SCRIPPS**  
**MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL**

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999

**American Sign Language (ASL): N**  
**Hospital Affiliation:** SCRIPPS  
**SAN DIEGO**

 mediator: yes  
Min/Max Age: 0\19
D3. Professional Providers Directory

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

MATERNAL AND FETAL MEDICINE

Mccullough, Deirdre
Provider ID: 277260
Board Certified Specialty: No
3020 Childrens Way
San Diego, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1639153018
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: Sharp Mary Birch Hosp for Women and Newborns, Sharp Grossmont Hospital, Sharp Memorial Hospital, Radys Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

Melber, Dora
Provider ID: 296990
Board Certified Specialty: No
3020 Childrens Way
San Diego, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical Ctr, Radys Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

Melber, Dora
Provider ID: 296989
Board Certified Specialty: No
7910 Frost St Ste 430
San Diego, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s) Spoken: Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical Ctr, Radys Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

2008
D3. 專業提供者目錄

HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
MELBER, DORA
Provider ID: 296994
Board Certified Specialty: No
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1124413026
Provider English Spoken: Y
Provider Language(s): Hungarian, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
MOORE, THOMAS
Provider ID: 208644
Board Certified Specialty: No
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1184682379
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
REIMERS, REBECCA
Provider ID: 294648
Board Certified Specialty: No
7910 FROST ST STE 220
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

2009
D3. 專業提供者目錄

MATERNAL AND FETAL MEDICINE
REIMERS, REBECCA
Provider ID: 294647
Board Certified Specialty: No
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1801207634
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
RICHARDSON, ALVIE
Provider ID: 277314
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1154305977
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Memorial Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE
SCHWENDEMANN, WADE
Provider ID: 277304
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6711
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego, Scripps Memorial Hospital, Grossmont Hospital, Sharp Memorial Hospital, Sharp Mary Birch Hosp For Women and Newborns, Tri City Medical Ctr, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

2010
D3. 專業提供者目錄

Website: N/A

MATERNAL AND FETAL MEDICINE

SCHWENDEMANN, WADE
Provider ID: 277307
Board Certified Specialty: No
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6710
After Hours Phone: (858) 966-6710
Provider Gender: Male
NPI: 1477563302
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital, Scripps Memorial Hospital, Sharp Grossmont Hospital, Sharp Mary Birch Hospital for Women and Newborns, Tri City Medical CTR, Sharp Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA
Provider ID: 277353
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6710
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1760730758
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Mary Birch Hospital for Women and Newborns, Earl and Lorraine Miller Children's Hospital, Long Beach Memorial Medical Center, University of California Irvine Medical Center, Sharp Memorial Hospital, Grossmont Hospital, Sharp Grossmont Hospital, Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

SHANNON, KELLI
Provider ID: 208474
Board Certified Specialty: No
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 939-4102
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1922156397
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Memorial Hospital, Sharp Mary Birch Hospital for Women and Newborns
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MATERNAL AND FETAL MEDICINE

WESTERMANN, MELISSA
Provider ID: 287084
Board Certified Specialty: No
7910 FROST ST STE 220
SAN DIEGO, CA 92123
Phone: (858) 966-6710
Fax: (858) 966-6710
After Hours Phone: (858) 966-6710
Provider Gender: Female
NPI: 1760730758
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Mary Birch Hospital for Women and Newborns, Earl and Lorraine Miller Children's Hospital, Long Beach Memorial Medical Center, University of California Irvine Medical Center, Sharp Memorial Hospital, Grossmont Hospital, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

2011
D3. 專業提供者目錄

BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM Website: N/A

MATERNAL AND FETAL MEDICINE
WESTERMANN, MELISSA
Provider ID: 242522 Board Certified Specialty: No 3003 HEALTH CENTER DR SAN DIEGO, CA 92123 Phone: (858) 966-6710 Fax: (858) 939-4102 After Hours Phone: (858) 966-6710 Provider Gender: Female NPI: 1760730758 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM Website: N/A

MATERNAL AND FETAL MEDICINE
WILLIAMS, KRISTIN
Provider ID: 277383 Board Certified Specialty: No 3003 HEALTH CENTER DR SAN DIEGO, CA 92123 Phone: (858) 966-6710 Fax: (858) 966-6711 After Hours Phone: (858) 966-6710 Provider Gender: Female NPI: 1992847131 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, Rady Childrens Hospital San Diego Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL):
D3. 專業提供者目錄

N
 Accessibility: CONTACT PROVIDER
 ☑ Hours: M-F
 8:00AM-5:00PM
 ☑ Website: N/A

MATERNAL AND FETAL MEDICINE

WOLF, RICHARD
Provider ID: 209253
Board Certified Specialty: No
4910 DIRECTORS PL STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497713846
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
SCRIPPS MERCY HOSPITAL,
CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL
ENCINITAS, PALOMAR MEDICAL CENTER, UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE

BAI-TONG, SHIYU
Provider ID: 283285
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1528454188
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE

CARROLL, JEANNE
Provider ID: 205727
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
After Hours Phone: (858) 966-7483
Fax: (858) 966-5818
Provider Gender: Female
NPI: 1386928224
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

DEL ROSARIO, PAMELA
Provider ID: 295000
Board Certified Specialty: No
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1952691941
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, Rady CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

2013
8:00AM-5:00PM
Website: N/A

**NEONATAL / PERINATAL MEDICINE**

**FLEMING, SARAH**
Provider ID: 205645
Board Certified Specialty: No
4077 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 260-7046
Fax: (619) 686-3843
After Hours Phone: (619) 260-7046
Provider Gender: Female
NPI: 1679809826
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**NEONATAL / PERINATAL MEDICINE**

**GLENN, TARA**
Provider ID: 283159
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
Provider Gender: Female
NPI: 1245617489
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Pioneers Memorial Hospital, Southwest Healthcare Inland Valley Hospital, Southwest Healthcare Rancho Springs Hospital, Scripps Mercy Hospital Chula Vista, El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**NEONATAL / PERINATAL MEDICINE**

**HIETALATI, SAMANTHA**
Provider ID: 294251
Board Certified Specialty: No
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 249-5839
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1245617489
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**NEONATAL / PERINATAL MEDICINE**

**HONOLD, JOSE**
Provider ID: 205941
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
NPI: 1093886855
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Pioneers Memorial Hospital, Southwest Healthcare Inland Valley Hospital, Southwest Healthcare Rancho Springs Hospital, Scripps Mercy Hospital Chula Vista, El Centro Regional Medical Center, Scripps Mercy Hospital, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

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<td>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PIONEERS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, EL CENTRO REGIONAL MEDICAL CENTER, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL</td>
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<td>Hours: M-F</td>
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NEONATAL / PERINATAL MEDICINE

LANE, BRIAN

Provider ID: 205707 | Board Certified Specialty: No |
| 3020 CHILDRENS WAY SAN DIEGO, CA 92123 |
| Phone: (858) 966-5818 |
| Fax: (858) 966-7483 |
| After Hours Phone: (858) 966-5818 |
| Provider Gender: Male |
| NPI: 1427129287 |
| Provider English Spoken: Y |
| Cultural Competency: N |
| Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA |
| Medi-Cal Open Panel: Yes |
| Min/Max Age: 0\19 |
| American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER |
| Hours: M-F | 8:00AM-5:00PM |

Website: N/A

NEONATAL / PERINATAL MEDICINE

LEE, CRYSTAL

Provider ID: 205630 | Board Certified Specialty: No |
| 3020 CHILDRENS WAY SAN DIEGO, CA 92123 |
| Phone: (858) 966-5818 |
| Fax: (858) 966-7483 |
| After Hours Phone: (858) 966-5818 |
| Provider Gender: Female |
| NPI: 1003028416 |
| Provider English Spoken: Y |
| Cultural Competency: N |
| Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS |
| Medi-Cal Open Panel: Yes |
| Min/Max Age: 0\19 |
| American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER |
| Hours: M-F | 8:00AM-5:00PM |

Website: N/A

NEONATAL / PERINATAL MEDICINE

MARC AURELE, KRISHELLE

Provider ID: 206208

2015
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1952503435
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RASY
CHILDREN'S HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
MARC AURELE, KRISHELLE
Provider ID: 206206
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (619) 543-3812
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1952503435
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RASY
CHILDREN'S HOSPITAL SAN
DIEGO, UCSD MEDICAL CTR,
UCSD LA JOLLA JOHN SALLY
THORNTON, TRI CITY
MEDICAL CTR, SCRIPPS
MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
MATOBA, NANA
Provider ID: 297974
Board Certified Specialty: No
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 249-5839
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1801952197
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: RASY
CHILDREN'S HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT
PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
D3. 專業提供者目錄

MATOBA, NANA
Provider ID: 299894
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 966-7483
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1801952197
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
MCCULLEY, DAVID
Provider ID: 277177
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Male
NPI: 1235304155
Provider Language(s) Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MESTAN, KAREN
Provider ID: 285932
Board Certified Specialty: No
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1942253356
Provider Language(s) Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NIEMI, ANNA-KAISA
Provider ID: 262157
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1497941397
Provider Language(s) Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

2017
NEONATAL / PERINATAL MEDICINE
NYMAN, KATHERINE
Provider ID: 301819
Board Certified Specialty: No
3010 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 249-5839
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1003260951
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
NYMAN, KATHERINE
Provider ID: 301822
Board Certified Specialty: No
4077 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 260-7046
Fax: (619) 686-3843
After Hours Phone: (619) 260-7046
Provider Gender: Female
NPI: 1003260951
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
ODONNELL, F JANE
Provider ID: 205578
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5818
Fax: (858) 966-7483
After Hours Phone: (858) 966-5818
Provider Gender: Female
NPI: 1477625325
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
Southwest Healthcare
Inland Valley Hospital,
UCSF Benioff Children's Hospital Oakland,
Southwest Healthcare Rancho Springs Hospital,
Scripps Mercy Hospital Chula Vista, Rady
Children's Hospital San Diego, Scripps Mercy Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

2018
### NEONATAL / PERINATAL MEDICINE

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<th>Name</th>
<th>Provider ID</th>
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<th>Address</th>
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<tbody>
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<td>RAMOS, CARLOS</td>
<td>206060</td>
<td>No</td>
<td>200 W ARBOR DR, SAN DIEGO, CA 92103</td>
<td>(619) 543-3759</td>
<td>(619) 543-3812</td>
<td>(619) 543-3759</td>
<td>UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDREN'S HOSPITAL SAN DIEGO</td>
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<td>SAIJI, ENIKO</td>
<td>206171</td>
<td>No</td>
<td>200 W ARBOR DR, SAN DIEGO, CA 92103</td>
<td>(619) 543-3759</td>
<td>(619) 543-3812</td>
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<td>UCSD MEDICAL CTR, EL CENTRO REGIONAL MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDREN'S HOSPITAL SAN DIEGO, UCSD LA Jolla, JOHN SALLY THORNTON</td>
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<td>SAUER, CHARLES</td>
<td>303904</td>
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<td>4077 5TH AVE, SAN DIEGO, CA 92103</td>
<td>(619) 260-7046</td>
<td>(858) 249-5839</td>
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<td>No</td>
<td>4077 5TH AVE, SAN DIEGO, CA 92103</td>
<td>(619) 260-7046</td>
<td>(858) 249-5839</td>
<td>(858) 966-5888</td>
<td>SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL</td>
</tr>
</tbody>
</table>

**Neonatal / Perinatal Medicine**

- **NEONATAL / PERINATAL MEDICINE**
  - **SUAER, CHARLES**
    - Provider ID: 303904
    - Board Certified Specialty: No
    - Address: 4077 5TH AVE, SAN DIEGO, CA 92103
    - Phone: (619) 260-7046
    - After Hours Phone: (619) 966-5888

**American Sign Language (ASL):**

- N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

**Website:** N/A

---

**NEONATAL / PERINATAL MEDICINE**

- **SAJTI, ENIKO**
  - Provider ID: 206171
  - Board Certified Specialty: No
  - Address: 200 W ARBOR DR, SAN DIEGO, CA 92103
  - Phone: (619) 543-3759
  - Fax: (619) 543-3812
  - After Hours Phone: (619) 543-3759

**Provider Gender:** Female

**NPI:** 1649433103

**Provider English Spoken:** Y

**Cultural Competency:** N

**Hospital Affiliation:** UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDREN'S HOSPITAL SAN DIEGO

**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0-19

**American Sign Language (ASL):**

- N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

**Website:** N/A
D3. 專業提供者目錄

Provider Gender: Male
NPI: 1538388988
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR HEALTH, SCRIPPS MEMORIAL HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
SONG, RICHARD
Provider ID: 206143
Board Certified Specialty: No
Provider Gender: Male
NPI: 1881893477
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, PALOMAR HEALTH, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
SPEZIALE, MARK
Provider ID: 206126
Board Certified Specialty: No
Provider Gender: Male
NPI: 1801978143
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDREN'S HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
SUTTNER, DENISE
Provider ID: 265085
Board Certified Specialty: No
Provider Gender: Female
NPI: 1457433799
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDREN'S HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
SUTTNER, DENISE
Provider ID: 265085
Board Certified Specialty: No
Provider Gender: Female
NPI: 1457433799
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY

2020
CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEONATAL / PERINATAL MEDICINE
SWEENEY, NATHALY
Provider ID: 206182
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 249-5839
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1164572632
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

NEONATAL / PERINATAL MEDICINE
VOLLER, STEPHANNIE
Provider ID: 303806
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 966-7483
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1417121971
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

NEONATAL / PERINATAL MEDICINE
VOLLER, STEPHANNIE
Provider ID: 303808
Board Certified Specialty: No
3010 CHILDRENS WAY FL 3 SAN DIEGO, CA 92123
Phone: (858) 966-5888
Fax: (858) 249-5839
After Hours Phone: (858) 966-5888
Provider Gender: Female
NPI: 1164572632
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

NEONATAL / PERINATAL MEDICINE
VOLLER, STEPHANNIE
Provider ID: 303807
Board Certified Specialty: No
8001 FROST ST SAN DIEGO, CA 92123
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
NPI: 1417121971
### NEONATAL / PERINATAL MEDICINE

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<thead>
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<th>Provider</th>
<th>WEISS, KATHERINE</th>
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<td>Min/Max Age:</td>
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<tr>
<td>Hours:</td>
<td>M-F 8:00AM-5:00PM</td>
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<td>Rady Children's Hospital San Diego</td>
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<td>0-19</td>
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<tr>
<td>Hospital Affiliation:</td>
<td>Rady Children's Hospital San Diego</td>
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<td>Medi-Cal Open Panel:</td>
<td>Yes</td>
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<td>Min/Max Age:</td>
<td>0-19</td>
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<td>American Sign Language (ASL):</td>
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<td>CONTACT PROVIDER</td>
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<tr>
<td>Website:</td>
<td>N/A</td>
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NEPHROLOGY
THOMAS, THEODORE
Provider ID: 262359
Board Certified Specialty: No
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Male
NPI: 1669477113
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR, KINDRED HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL, CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
Accessible: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

NEPHROLOGY
ZHONG, YAN
Provider ID: 296054
Board Certified Specialty: No
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Female
NPI: 1467683540
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, LAC RANCHO LOS AMIGOS NATIONAL REHAB CENTER, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, KECK HOSPITAL OF USC, Los Angeles General Medical Center, SELECT SPECIALTY HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEPHROLOGY
ZHONG, YAN
Provider ID: 296053
Board Certified Specialty: No
4060 4TH AVE STE 220
SAN DIEGO, CA 92103
Phone: (619) 299-2350
Fax: (619) 297-8379
After Hours Phone: (619) 299-2350
Provider Gender: Female
NPI: 1467683540
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, LAC RANCHO LOS AMIGOS NATIONAL REHAB CENTER, SCRIPPS MERCY HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, KECK HOSPITAL OF USC, Los Angeles General Medical Center, SELECT SPECIALTY HOSPITAL SAN DIEGO, SELECT SPECIALTY HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

NEUROLOGY
BEVINS, ELIZABETH
Provider ID: 241943
Board Certified Specialty: No
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1013395151
D3. Professional Providers Directory

- **Provider English Spoken:** Y
  - **Cultural Competency:** N
  - **Hospital Affiliation:** UCSD MEDICAL CTR, UCSD LA JOLLA
  - **JOHN SALLY THORNTON**
  - **Medi-Cal Open Panel:** Yes
  - **Min/Max Age:** 0\999
  - **American Sign Language (ASL):** N
  - **Accessibility:** CONTACT PROVIDER
  - **Hours:** M-F 8:00AM-5:00PM
  - **Website:** N/A

**NEUROLOGY**

**BUI, JONATHAN**

- **Provider ID:** 206005
- **Board Certified Specialty:** No
- **Address:** 8001 FROST ST
  - SAN DIEGO, CA 92123
- **Phone:** (858) 966-5999
- **Fax:** (858) 966-4930
- **After Hours Phone:** (858) 966-5999
- **Provider Gender:** Male
- **NPI:** 1730247974
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** Rady CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\19
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A

**NEUROLOGY**

**COUGHLIN, DAVID**

- **Provider ID:** 240949
- **Board Certified Specialty:** Yes
- **Address:** 4510 EXECUTIVE DR STE 325
  - SAN DIEGO, CA 92121
- **Phone:** (800) 926-8273
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Male
- **NPI:** 1740543784
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Hospital Affiliation:** Rady CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
- **Medi-Cal Open Panel:** Yes
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM
- **Website:** N/A

**NEUROLOGY**

**COUGHLIN, DAVID**

- **Provider ID:** 304172
- **Board Certified Specialty:** No
- **Address:** 6655 ALVARADO RD
  - SAN DIEGO, CA 92120
- **Phone:** (800) 926-8273
- **Fax:** (888) 539-8781
- **After Hours Phone:** (800) 926-8273

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Your PCP’s care team may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from Blue Shield of California, after which they may be covered.

For online access to the mental health service provider list, please visit [blueshieldca.com/fad](http://blueshieldca.com/fad).
D3. 專業提供者目錄

926-8273
Provider Gender: Male
NPI: 1740543784
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**NEUROLOGY**

DOVE, KATHERINE
Provider ID: 302784
Board Certified Specialty: No
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (619) 543-3500
Fax: (888) 539-8781
After Hours Phone: (619) 543-3500
Provider Gender: Female
NPI: 1033642574
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**NEUROLOGY**

DUNN-PIRIO, ANASTASIE
Provider ID: 203235
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1700177136
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**NEUROLOGY**

GOLD, JEFFREY
Provider ID: 283335
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1548657992
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**NEUROLOGY**

FREDERICK, ALIYA
Provider ID: 283152
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1700177136
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**NEUROLOGY**

DUNN-PIRIO, ANASTASIE
Provider ID: 304160
Board Certified Specialty: No
3020 CHILDRENS WAY FL 2025
SAN DIEGO, CA 92123  
Phone: (858) 966-5999  
Fax: (858) 576-8412  
After Hours Phone: (858) 966-5999  
Provider Gender: Male  
NPI: 1568773984  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Rady Children's Hospital San Diego, UCSF Benioff Children's Hospital Oakland, Sharp Memorial Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

NEUROLOGY  
GUIDO-ESTRADA, NATALIE  
Provider ID: 303271  
Board Certified Specialty: No  
3030 Children's Way FL 4  
San Diego, CA 92123  
Phone: (858) 966-5819  
Fax: (858) 966-4930  
After Hours Phone: (858) 966-5819  
Provider Gender: Female  
NPI: 1528353521  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD Medical Center, UCSD La Jolla  
John Sally Thornton  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

NEUROLOGY  
HANNAWI, ANDREW  
Provider ID: 283154  
Board Certified Specialty: No  
3020 Children's Way  
San Diego, CA 92123  
Phone: (858) 966-5999  
Fax: (858) 576-8412  
After Hours Phone: (858) 966-5999  
Provider Gender: Male  
NPI: 1194179135  
Provider English Spoken: Y  
Provider Language(s)
D3. 專業提供者目錄

Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY
IRAGUIMADOZ, VICENTE
Provider ID: 304154
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1053326710
 Provider English Spoken: Y
 Provider Language(s) Spoken: Russian, Samoan, Spanish
Cultural Competency: N
Hospital Affiliation: ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 8:00AM-4:00PM F 8:00AM-3:00PM
 Website: N/A

NEUROLOGY
KHAMISHON, BORIS
Provider ID: 269923
Board Certified Specialty: No
6699 ALVARADO RD STE 2301
SAN DIEGO, CA 92120
Phone: (619) 582-2595
After Hours Phone: (619) 582-2595
Provider Gender: Male
NPI: 1104922038
 Provider English Spoken: Y
 Provider Language(s) Spoken: Russian, Spanish
Cultural Competency: N
Hospital Affiliation: ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

NEUROLOGY
Kim MCMANUS, OLIVIA
Provider ID: 303229
Board Certified Specialty: No
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1538320395
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A
D3. 專業提供者目錄

NEUROLOGY
LEE, DAVID
Provider ID: 246263
Board Certified Specialty: No
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

NEUROLOGY
LEE, DAVID
Provider ID: 304198
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1871884130
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

NEUROLOGY
LEGER, GABRIEL
Provider ID: 304176
Board Certified Specialty: No
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Phone: (858) 543-8540
After Hours Phone: (858) 543-8540
Provider Gender: Male
NPI: 1720367899
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

NEUROLOGY
LONGARDNER, KATHERINE
Provider ID: 268346
Board Certified Specialty: No
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1720367899
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
### D3. 專業提供者目錄

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2029
D3. 專業提供者目錄

NEUROLOGY
RIGGINS, NINA
Provider ID: 304200
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1568655264
Provider English Spoken: Y
Provider Language(s) Spoken: Russian
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

NEUROLOGY
SCHORR, EMILY
Provider ID: 305020
Board Certified Specialty: No
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255862041
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

NEUROLOGY
SCHORR, EMILY
Provider ID: 305023
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255862041
Provider English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

NEUROLOGY
SWEAT, MARIE
Provider ID: 303831
Board Certified Specialty: No
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1861929036
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Hospital Affiliation: RACY CHILDRENS HOSPITAL SAN DIEGO
Accessibility: CONTACT PROVIDER
Website: N/A

NEUROLOGY
YANG, JENNIFER
Provider ID: 301593
Board Certified Specialty: No
D3. 專業提供者目錄

3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 576-8412
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1528420619
Provider English Spoken: Y
Provider Language(s): Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY
ZIMBRIC, MICHAEL
Provider ID: 303284
Board Certified Specialty: No
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Male
NPI: 1487819546
Provider English Spoken: Y
Provider Language(s): French
Cultural Competency: N
Hospital Affiliation: UCSF Medical Center At Mission Bay, UCSF Medical Center at Mount Zion, Medical Ctr At UCSF, UCSD Medical Ctr, UCSD La Jolla John Sally Thornton, Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY
GUIDO-ESTRADA, NATALIE
Provider ID: 205825
Board Certified Specialty: No
D3. 專業提供者目錄

8001 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1528353521
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OSTEOTRISTICS / GYNECOLOGY
BLAKE, GARY
Provider ID: 290731
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1497738439
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
9:00AM-4:00PM
Website: N/A
Email:
JOSHUACOHENMD@YAHOO.COM

NEUROLOGY CHILD
SAHAGIAN, MICHELLE
Provider ID: 206074
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5999
Fax: (858) 966-4930
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1275604035
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

OSTEOTRISTICS / GYNECOLOGY
COHEN, MANSOUR
Provider ID: 205940
Board Certified Specialty: Yes
7695 CARDINAL CT STE 390
SAN DIEGO, CA 92123
Phone: (858) 279-8111
Fax: (858) 279-4703
After Hours Phone: (858) 279-8111
Provider Gender: Male
NPI: 1346225356
Provider English Spoken: Y
Provider Language(s)
Spoken: Arabic, Farsi, Hebrew, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):

OSTEOTRISTICS / GYNECOLOGY
DELCORE, LAURA
Provider ID: 291330
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1790128759
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL):
### Obstetrics / Gynecology

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2033
D3. 專業提供者目錄

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**

Provider ID: 291339  
Board Certified Specialty: No  
Provider Gender: Female  
NPI: 1730507567  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**OBSTETRICS / GYNECOLOGY**

**DRIEBE, AMY**

Provider ID: 291337  
Board Certified Specialty: No  
Provider Gender: Female  
NPI: 1730507567  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**OBSTETRICS / GYNECOLOGY**

**FRUGONI, GINA**

Provider ID: 270056  
Board Certified Specialty: No  
Provider Gender: Female  
NPI: 1578729315  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**OBSTETRICS / GYNECOLOGY**

**GROGAN, BRIAN**

Provider ID: 296002  
Board Certified Specialty: No  
Provider Gender: Male  
NPI: 1235218439  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**OBSTETRICS / GYNECOLOGY**

**GROGAN, BRIAN**

Provider ID: 296001  
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<td>Phone: (858) 810-8700, Fax: (858) 633-4680</td>
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**OBSTETRICS / GYNECOLOGY**

**GUPTA, PRATIMA**

Provider ID: 257547
Board Certified Specialty: No
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Min/Max Age: 16\999
American Sign Language (ASL): N
Contact
Accessibility: CONTACT PROVIDER

**HARVEY, SCOTT**

Provider ID: 278917
Board Certified Specialty: No
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Min/Max Age: 16\999
American Sign Language (ASL): N
Contact
Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

**OBSTETRICS / GYNECOLOGY**

**HOANG, MAI**

Provider ID: 208294  
Board Certified Specialty: No  
4168 FRONT ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1104143593  
Provider English Spoken: Y  
Provider Language(s) Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**KLEIN, DAVID**

Provider ID: 271560  
Board Certified Specialty: No  
16950 VIA TAZON  
SAN DIEGO, CA 92127  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1780073635  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**KOHATSU, KAREN**

Provider ID: 205481  
Board Certified Specialty: No  
11939 RANCHO BERNARDO RD STE 110  
SAN DIEGO, CA 92128
D3. 專業提供者目錄

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Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16-999
American Sign Language (ASL): N
Provider ID: 242345
Board Certified Specialty: No
5555 RESERVOIR DR STE 208
SAN DIEGO, CA 92120
Phone: (619) 583-7555
Fax: (619) 583-0555
After Hours Phone: (619) 583-7555
Provider Gender: Female
NPI: 1518925015
Provider English Spoken: Y
Provider Language(s): Farsi
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, UCSD LA JOLLA JOHN SALLY THORNTON

OBSTETRICS / GYNECOLOGY
MANI, PARVIN

Provider ID: 285742
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1467585521
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

OBSTETRICS / GYNECOLOGY
MEADOWS, AUDRA

Provider ID: 299921
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295232973
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

OBSTETRICS / GYNECOLOGY
MELENDEZ, ARIANA
D3. 專業提供者目錄

专业提供者目录

OBSTETRICS / GYNECOLOGY
MELENDEZ, ARIANA
Provider ID: 299922
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
✉ Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1295232973
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
PICKETT, CHARLOTTE
Provider ID: 299978
Board Certified Specialty: No
3750 CONVOY ST STE 312
SAN DIEGO, CA 92111
📞 Phone: (800) 926-8273
✉ Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1447530696
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
PICKETT, CHARLOTTE
Provider ID: 299980
Board Certified Specialty: No
6030 VILLAGE WAY
SAN DIEGO, CA 92130
📞 Phone: (800) 926-8273
✉ Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1447530696
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OBSTETRICS / GYNECOLOGY
PICKETT, CHARLOTTE
Provider ID: 299981
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
📞 Phone: (800) 926-8273
✉ Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1447530696
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
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<td>PINSON, KELSEY</td>
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<td>Website: N/A</td>
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</tbody>
</table>
D3. 專業提供者目錄

OBSTETRICS / GYNECOLOGY

SHAH, NEMI
Provider ID: 272580
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1245590124
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOllA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, TEMECULA VALLEY HOSPITAL INC, LOMA LINDA UNIVERSITY MED CTR MURRIETA
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

SUYAMA, JULIE
Provider ID: 284290
Board Certified Specialty: No
4520 EXECUTIVE DR STE 360
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1306372800
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOllA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY

SHUCKETT, ARIEL
Provider ID: 290708
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1558715268
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOllA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
**D3. 專業提供者目錄**

**THOMSON, SAMANTHA**
Provider ID: 285176  
Board Certified Specialty: No  
4168 FRONT ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1689013468  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**OBSTETRICS / GYNECOLOGY**

**THOMSON, SAMANTHA**
Provider ID: 285174  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1689013468  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Website: N/A

**THOMSON, SAMANTHA**
Provider ID: 285176  
Board Certified Specialty: No  
4168 FRONT ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1689013468  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CEDARS SINAI MEDICAL CENTER, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Website: N/A

**OCCUPATIONAL THERAPIST**

**BOND, KIMBERLEE**
Provider ID: 206549  
Board Certified Specialty: No  
16950 VIA TAZON  
SAN DIEGO, CA 92127  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1669770939  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A
D3. 專業提供者目錄

- **Provider English Spoken: Y**
- **Cultural Competency: N**
- **Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON**
- **Medi-Cal Open Panel: Yes**
- **Min/Max Age: 0\1999**
- **American Sign Language (ASL): N**
- **Accessibility: CONTACT PROVIDER**
- **Hours: M-F 8:00AM-5:00PM**
- **Website: N/A**

**OCCUPATIONAL THERAPIST**

**LARSEN, JULIE**

Provider ID: 258359

- **Board Certified Specialty: No**
- **8929 UNIVERSITY CENTER LN STE 200 SAN DIEGO, CA 92122**
- **Phone: (858) 543-0333**
- **Fax: (858) 657-1809**
- **After Hours Phone: (855) 543-0333**

Provider Gender: Female

- **NPI: 1497009179**

- **Provider English Spoken: Y**
- **Cultural Competency: N**
- **Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON**
- **Medi-Cal Open Panel: Yes**
- **Min/Max Age: 0\1999**
- **American Sign Language (ASL): N**
- **Accessibility: CONTACT PROVIDER**
- **Hours: M-F 8:00AM-5:00PM**
- **Website: N/A**

**OPHTHALMOLOGY**

**BAXTER, SALLY**

Provider ID: 272789

- **Board Certified Specialty: No**
- **200 W ARBOR DR STE 101 SAN DIEGO, CA 92103**
- **Phone: (800) 926-8273**
- **Fax: (888) 539-8781**
- **After Hours Phone: (800) 926-8273**

Provider Gender: Female

- **NPI: 1912325184**

- **Provider English Spoken: Y**
- **Cultural Competency: N**
- **Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON**
- **Medi-Cal Open Panel: Yes**
- **Min/Max Age: 0\1999**
- **American Sign Language (ASL): N**

**BANSAL, PREETI**

Provider ID: 205620

- **Board Certified Specialty: Yes**
- **7910 FROST ST STE 200 SAN DIEGO, CA 92123**
- **Phone: (858) 309-7702**
- **Fax: (858) 966-7403**
- **After Hours Phone: (858) 309-7702**

Provider Gender: Female

- **NPI: 1871664631**

- **Provider English Spoken: Y**
- **Cultural Competency: N**
- **Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR**
- **Medi-Cal Open Panel: Yes**
- **Min/Max Age: 0\19**
- **American Sign Language (ASL): N**
- **Accessibility: CONTACT PROVIDER**
- **Hours: M-F 8:00AM-5:00PM**
- **Website: N/A**

**BANSAL, PREETI**

Provider ID: 205620

- **Board Certified Specialty: Yes**
- **7910 FROST ST STE 200 SAN DIEGO, CA 92123**
- **Phone: (858) 309-7702**
- **Fax: (858) 966-7403**
- **After Hours Phone: (858) 309-7702**

Provider Gender: Female

- **NPI: 1871664631**

- **Provider English Spoken: Y**
- **Cultural Competency: N**
- **Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, TRI CITY MEDICAL CTR**
- **Medi-Cal Open Panel: Yes**
- **Min/Max Age: 0\19**
- **American Sign Language (ASL): N**
- **Accessibility: CONTACT PROVIDER**
- **Hours: M-F 8:00AM-5:00PM**
- **Website: N/A**

**OCCUPATIONAL THERAPIST**

**MIKUT, ALYSSA**

Provider ID: 258415

- **Board Certified Specialty: No**
- **8929 UNIVERSITY CENTER LN STE 200 SAN DIEGO, CA 92122**
- **Phone: (858) 249-0832**
- **Fax: (858) 657-1809**
- **After Hours Phone: (858) 249-0832**

Provider Gender: Female

- **NPI: 1952816134**

- **Provider English Spoken: Y**
- **Cultural Competency: N**
- **Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR**
- **Medi-Cal Open Panel: Yes**
- **Min/Max Age: 0\999**
- **American Sign Language (ASL): N**
- **Accessibility: CONTACT PROVIDER**
- **Hours: M-F 8:00AM-5:00PM**
- **Website: N/A**
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**OPHTHALMOLOGY**

**BAXTER, SALLY**
Provider ID: 272788
Board Certified Specialty: No
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1912325184
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA Jolla JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**OPHTHALMOLOGY**

**BEAZER, ALEX**
Provider ID: 272803
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273

**OPHTHALMOLOGY**

**BHATIA, SHAGUN**
Provider ID: 240636
Board Certified Specialty: No
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA Jolla JOHN SALLY THORNTON, UCSD MEDICAL CTR, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**OPHTHALMOLOGY**

**GUALTIERI, CHRISTOPHER**
Provider ID: 252313
Board Certified Specialty: Yes
3969 4TH AVE STE 300
SAN DIEGO, CA 92103
Phone: (619) 688-2648
Fax: (619) 688-2626
D3. 專業提供者目錄

- After Hours Phone: (619) 688-2648
  Provider Gender: Male
  NPI: 1790769156
  Provider English Spoken: Y
  Provider Language(s) Spoken: Spanish
  Cultural Competency: N
  Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
  Medi-Cal Open Panel: Yes
  Min/Max Age: 6\150
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  Website: N/A
  Email: MYNEWYES@HOTMAIL.COM

OPHTHALMOLOGY
HENNEIN, LAUREN
Provider ID: 297011
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
NPI: 1699216010
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
Email: DOCTORPAUL@SBCGLOBAL.NET

OPHTHALMOLOGY
HUYNH, PAUL
Provider ID: 295645
Board Certified Specialty: No
4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Phone: (619) 283-1303
Fax: (619) 283-1666
After Hours Phone: (619) 283-1303
Provider Gender: Male
NPI: 1871577056
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog, Vietnamese
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
SA 8:00AM-5:00PM
Website: N/A
Email: DOCTORPAUL@SBCGLOBAL.NET
D3. 專業提供者目錄

Provider Gender: Male
NPI: 1871577056
- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Spanish, Tagalog, Vietnamese
- Hospital Affiliation: SHARP MEMORIAL HOSPITAL,
  SCRIPPS MEMORIAL HOSPITAL
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:00AM-5:00PM
    SA 8:00AM-5:00PM
  - Website: N/A

**OPHTHALMOLOGY**

**JIN, MAN**

Provider ID: 299955

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103

- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273

Provider Gender: Female
NPI: 1073010120

- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

**OPHTHALMOLOGY**

**JACOBSEN, BRADLEY**

Provider ID: 302869

Board Certified Specialty: No

7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123

- Phone: (858) 609-7100
- Fax: (858) 609-7106
- After Hours Phone: (858) 609-7100

Provider Gender: Male
NPI: 1760845184

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: TRI CITY MEDICAL CTR
- Medi-Cal Open Panel: Yes

**OPHTHALMOLOGY**

**KHATIB, NORA**

Provider ID: 305375

Board Certified Specialty: No

4060 4TH AVE STE 640
SAN DIEGO, CA 92103

- Phone: (619) 642-2240
- Fax: (619) 642-2245
- After Hours Phone: (619) 642-2240

Provider Gender: Female

**OPHTHALMOLOGY**

**KLINE, LANNING**

Provider ID: 239915

Board Certified Specialty: No

4060 4TH AVE STE 610
SAN DIEGO, CA 92103

- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273

Provider Gender: Male
NPI: 1538487756

- Provider English Spoken: Y
- Provider Language(s)
  Spoken: Arabic, Spanish
- Cultural Competency: N
- Hospital Affiliation: SHARP MEMORIAL HOSPITAL,
  SCRIPPS MERCY HOSPITAL,
  SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL
- Medi-Cal Open Panel: Yes
- Min/Max Age: 14-999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:00AM-5:00PM
  - Website: N/A

2046
D3. 專業提供者目錄

OPHTHALMOLOGY
LI, ALEXANDRIA
Provider ID: 272833
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1841652864
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
LIU, YUNXIANG
Provider ID: 210803
Board Certified Specialty: No
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Provider Gender: Female
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RODY CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
MOVAGHAR, MANSOOR
Provider ID: 216412
Board Certified Specialty: No
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
After Hours Phone: (858) 309-7702
Provider Gender: Male
NPI: 1497792220
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RODY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

OPHTHALMOLOGY
OHALLORAN, HENRY
Provider ID: 205888  
Board Certified Specialty: No  
7910 FROST ST STE 200  
SAN DIEGO, CA 92123  
Phone: (858) 309-7702  
Fax: (858) 966-7403  
After Hours Phone: (858) 309-7702  
Provider Gender: Male  
NPI: 1235287947  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

OPHTHALMOLOGY  
PHAN, RYAN  
Provider ID: 305445  
Board Certified Specialty: No  
10737 CAMINO RUIZ STE 100  
SAN DIEGO, CA 92126  
Phone: (858) 549-3200  
Fax: (858) 549-3207  
After Hours Phone: (858) 549-3200  
Provider Gender: Male  
NPI: 1588027213  
Provider English Spoken: Y  
Provider Language(s): Vietnamese  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A  

OPHTHALMOLOGY  
PHAN, RYAN  
Provider ID: 287883  
Board Certified Specialty: No  
10737 CAMINO RUIZ STE 100  
SAN DIEGO, CA 92126  
Phone: (858) 549-3200  
Fax: (858) 549-3207  
After Hours Phone: (858) 549-3200  
Provider Gender: Male  
NPI: 1588027213  
Provider English Spoken: Y  
Provider Language(s): Vietnamese  
Cultural Competency: N  
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F
D3. 專業提供者目錄

8:00AM-5:00PM  ☐ Website: N/A

OPHTHALMOLOGY
PHAN, RYAN
Provider ID: 302925
Board Certified Specialty: No
☐ 4844 UNIVERSITY AVE STE A
   SAN DIEGO, CA 92105
   ☐ Phone: (619) 283-1303
   ☐ Fax: (619) 283-1666
   ☐ After Hours Phone: (619) 283-1303
   Provider Gender: Male
   NPI: 1588027213
   ☐ Provider English Spoken: Y
   ☐ Provider Language(s): Vietnamese
   ☐ Cultural Competency: N
   Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL
   Medi-Cal Open Panel: Yes
   Min/Max Age: 0\999
   American Sign Language (ASL): N
   ☐ Accessibility: CONTACT PROVIDER
   ☐ Website: N/A

OPHTHALMOLOGY
PUIG LLANO, MANUEL
Provider ID: 299964
Board Certified Specialty: No
☐ 4060 4TH AVE STE 610
   SAN DIEGO, CA 92103
   ☐ Phone: (800) 926-8273
   ☐ Fax: (888) 539-8781
   ☐ After Hours Phone: (800) 926-8273
   Provider Gender: Male
   NPI: 1699268292
   ☐ Provider English Spoken: Y
   ☐ Provider Language(s): French, German, Spanish, Tagalog
   Cultural Competency: N
   Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA
   Medi-Cal Open Panel: Yes
   Min/Max Age: 0\999
   American Sign Language (ASL): N
   ☐ Accessibility: CONTACT PROVIDER
   ☐ Website: N/A

OPHTHALMOLOGY
RAHMATNEJAD, KAMRAN
Provider ID: 300040
Board Certified Specialty: No
☐ 200 W ARBOR DR
   SAN DIEGO, CA 92103
   ☐ Phone: (800) 926-8273
   ☐ Fax: (888) 539-8781
   ☐ After Hours Phone: (800) 926-8273
   Provider Gender: Male
   NPI: 1699268292
   ☐ Provider English Spoken: Y
   ☐ Provider Language(s): Vietnamese
   ☐ Cultural Competency: N
   Medi-Cal Open Panel: Yes
   Min/Max Age: 0\999
   American Sign Language (ASL): N
   ☐ Accessibility: CONTACT PROVIDER
   ☐ Website: N/A
D3. 專業提供者目錄

**OPHTHALMOLOGY**

**SATTERFIELD, KELLIE**
Provider ID: 305302
Board Certified Specialty: No
5330 CARROLL CANYON RD STE 210
SAN DIEGO, CA 92121
Phone: (800) 765-2737
Fax: (619) 291-6577
After Hours Phone: (800) 765-2737
Provider Gender: Female
NPI: 1629509336
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-4:00PM
W-F 8:30AM-1:00PM
Website: N/A

**SHEILS, CATHERINE**
Provider ID: 299936
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932605649
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**SONG, DELU**
Provider ID: 302872
Board Certified Specialty: No
7695 CARDINAL CT STE 100
SAN DIEGO, CA 92123
Phone: (858) 609-7100
Fax: (858) 609-7106
After Hours Phone: (858) 609-7100
Provider Gender: Male
NPI: 1437689536
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese, Mandarin
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, UCSD MEDICAL CTR, RADY CHILDRENS

**OPHTHALMOLOGY**

3939 3RD AVE
SAN DIEGO, CA 92103
Phone: (800) 765-2737
Fax: (619) 291-6577
After Hours Phone: (800) 765-2737
Provider Gender: Female
NPI: 1932605649
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:30AM-4:00PM
W-F 8:30AM-1:00PM
Website: N/A

**SHEILS, CATHERINE**
Provider ID: 305306
Board Certified Specialty: No
3939 3RD AVE
SAN DIEGO, CA 92103
Phone: (800) 765-2737
Fax: (619) 291-6577
After Hours Phone: (800) 765-2737
Provider Gender: Female
NPI: 1932605649
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY
YAMADA, KENTARO
Provider ID: 295848
Board Certified Specialty: No
1040 UNIVERSITY AVE STE B209A
SAN DIEGO, CA 92103
Phone: (619) 299-1100
Fax: (619) 299-7156
After Hours Phone: (619) 299-1100
Provider Gender: Male
NPI: 1629047188
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Japanese, Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

OPTOMETRIST
AOTO, KIM
Provider ID: 268723
Board Certified Specialty: No
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
NPI: 1780935650
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:30AM-5:00PM
 Website: N/A

OPTOMETRIST
AOTO, KIM
Provider ID: 268718
Board Certified Specialty: No
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
NPI: 1780935650
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M 9:00AM-5:00PM
 TU 8:30AM-4:30PM
 W 7:30AM-4:30PM
 TH 9:30AM-5:00PM
 F 8:30AM-4:00PM
 Website: N/A

OPTOMETRIST
AOTO, KIM
Provider ID: 268795
Board Certified Specialty: No
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (800) 898-2020
Fax: (844) 897-3788
After Hours Phone: (800) 898-2020
Provider Gender: Female
NPI: 1780935650
 Provider English Spoken: Y
 Provider Language(s)
  Spoken: Vietnamese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 9:00AM-5:00PM
 TU 8:30AM-4:30PM
 W 7:30AM-4:30PM
 TH 9:30AM-5:00PM
 F 8:30AM-4:00PM
 Website: N/A
D3. 專業提供者目錄

**OPTOMETRIST**

**JOMOC, CAITLIN**

Provider ID: 304155
Board Certified Specialty: No
Doctor's Office: 16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1861164642
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**OPTOMETRIST**

**KIM, PHILIP**

Provider ID: 287910
Board Certified Specialty: No
Doctor's Office: 4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Provider Gender: Male
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**OPTOMETRIST**

**SCHWAB, GARY**

Provider ID: 290410
Board Certified Specialty: No
Doctor's Office: 6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Male
NPI: 1740274372
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**OPTOMETRIST**

**VO, ANDREW**

Provider ID: 304147
Board Certified Specialty: No
Doctor's Office: 16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790291565
Provider English Spoken: Y
American Sign Language (ASL): N
Min/Max Age: 0\999
Accessibility: CONTACT PROVIDER
Website: N/A
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
VO, ANDREW
Provider ID: 201312
Board Certified Specialty: No
200 W ARBOR DR STE 101
SAN DIEGO, CA 92103
Phone: (619) 543-7907
After Hours Phone: (619) 543-7907
Provider Gender: Male
NPI: 1790291565
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
YU, CAROL
Provider ID: 301683
Board Certified Specialty: No
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1639697451
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
YU, CAROL
Provider ID: 301684
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1639697451
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

ORAL MAXILLOFACIAL SURGEON
DENTICO-OLIN, MARC
Provider ID: 304727
Board Certified Specialty: No
2878 CAMINO DEL RIO S STE 210
SAN DIEGO, CA 92108
Phone: (619) 298-2200
Fax: (619) 298-2250
After Hours Phone: (619) 298-2200
Provider Gender: Male
NPI: 1629205174
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes

D3. 專業提供者目錄

<table>
<thead>
<tr>
<th>Provider</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Accessibility</th>
<th>Hours</th>
<th>Website</th>
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<tbody>
<tr>
<td>DENTICO-OLIN, MARC</td>
<td>273663</td>
<td>No</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
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<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
<td>N/A</td>
</tr>
<tr>
<td>BLISS, MORGAN</td>
<td>272565</td>
<td>Yes</td>
<td>UCSD Medical Center La Jolla</td>
<td>Yes</td>
<td>0\19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
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<tr>
<td>JOHN SALLY THORNTON</td>
<td>299634</td>
<td>No</td>
<td>UCSD Medical Center La Jolla</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
<td>N/A</td>
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<tr>
<td>BRUMUND, KEVIN</td>
<td>299461</td>
<td>No</td>
<td>UCSD Medical Center La Jolla</td>
<td>Yes</td>
<td>0\19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F 8:00AM-5:00PM</td>
<td>N/A</td>
</tr>
</tbody>
</table>

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1881652972
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
CALIFANO, JOSEPH
Provider ID: 299462
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1881652972
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
CARVALHO, DANIELA
Provider ID: 205628
Board Certified Specialty: No
3030 CHILDRENS WAY STE 109
SAN DIEGO, CA 92123
Phone: (858) 309-7702
After Hours Phone: (858) 309-7702
Provider Gender: Female
NPI: 1154492916
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Scripps Memorial Hospital, Sharp Memorial Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
COFFEY, CHARLES
Provider ID: 299583
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1881652972
Provider English Spoken: Y
Cultural Competency: N
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

OTOLARYNGOLOGY
COFFEY, CHARLES
Provider ID: 299582
Board Certified Specialty: No
Address: 16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932297330
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
DECONDE, ADAM
Provider ID: 299569
Board Certified Specialty: No
Address: 16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1588988919
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

DECONDE, ADAM
Provider ID: 299568
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1588988919
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
FRIEDMAN, RICK
Provider ID: 299532
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982708558
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP
GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC,
ORANGE COUNTY GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
FRIEDMAN, RICK
Provider ID: 299530
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982708558
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIH
HEALTH GOOD SAMARITAN HOSPITAL, CHILDRENS HOSP
OF LOS ANGELES, SOUTH COAST GLOBAL MEDICAL CENTER INC, ANAHEIM
GLOBAL MEDICAL CENTER, ORANGE COUNTY GLOBAL MEDICAL CENTER INC,
CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

2057
D3. 專業提供者目錄

CHAPMAN GLOBAL MEDICAL CENTER INC, UCSD LA JOLLA
JOHN SALLY THORNTON, UCSD LA JOLLA
JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
FRIESEN, TZYYNONG
Provider ID: 272604
Board Certified Specialty: No
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
NPI: 1952740177
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
GILANI, SAPIDEH
Provider ID: 299559
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003825571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
GILANI, SAPIDEH
Provider ID: 299560
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003825571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
GREENE, JACQUELINE
Provider ID: 298396
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1003825571
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
926-8273
Provider Gender: Female
NPI: 1144583931
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
GREENE, JACQUELINE
Provider ID: 298397
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1144583931
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY
HARRIS, JEFFREY
Provider ID: 299576
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 114583931
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Website: N/A

OTOLARYNGOLOGY
HOM, DAVID
Provider ID: 299514
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1659305027
Provider English Spoken: Y
Cultural Competency: N
D3. 專業提供者目錄

Hospital Affiliation: UCSD LA
JOLLA JOHN SALLY
THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
HOM, DAVID
Provider ID: 299511
Board Certified Specialty: No
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590
Provider Gender: Male
NPI: 1659305027
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA
 JOLLA JOHN SALLY
 THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
HUSSEMAN, JACOB
Provider ID: 301052
Board Certified Specialty: No
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124034053
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

OTOLARYNGOLOGY
JIANG, WEN
Provider ID: 272660
Doctor's PCP's doctors may have their own network mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, certain services may require mental health service providers to obtain Blue Shield prior authorization before being covered.
If you want to obtain a list of mental health service providers online, please visit blueshieldca.com/fad.
D3. 專業提供者目錄

BOARD CERTIFIED SPECIALTY: YES

3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
NPI: 1659305753
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
KARI, ELINA
Provider ID: 299443
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6631
After Hours Phone: (619) 543-6631
Provider Gender: Female
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDREN'S HOSPITAL OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
KARI, ELINA
Provider ID: 299443
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780860536
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
CHILDREN'S HOSPITAL OF LOS ANGELES, PIH HEALTH HOSPITAL - WHITTIER, UCSD
LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
LEUIN, SHELBY
Provider ID: 272637
Board Certified Specialty: No
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Female
NPI: 1659305753
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

SAN DIEGO, CA 92123
☎ Phone: (858) 309-7701
Fax: (858) 966-8038
☎ After Hours Phone: (858) 309-7701
Provider Gender: Female
NPI: 1124230909
☒ Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
⏰ Hours: M-F
9:00AM-5:00PM
Website: N/A

OTOLARYNGOLOGY

MAGIT, ANTHONY
Provider ID: 272767
Board Certified Specialty: Yes
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
☎ Phone: (855) 309-7701
Fax: (858) 966-4062
☎ After Hours Phone: (855) 309-7701
Provider Gender: Male
NPI: 1891858379
☒ Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
Website: N/A

2062
D3. 專業提供者目錄

OTOLARYNGOLOGY
MATSUOKA, AKIHIRO
Provider ID: 299590
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1669630653
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
MATSUOKA, AKIHIRO
Provider ID: 299591
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1669630653
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
NGUYEN, QUYEN
Provider ID: 299607
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-6631
Fax: (619) 543-6532
After Hours Phone: (619) 543-6631
Provider Gender: Female
NPI: 1477524452
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

Website: N/A

OTOLARYNGOLOGY
NGUYEN, QUYEN
Provider ID: 299606
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1477524452
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital
San Diego, Valley Childrens Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
VAHABZADEH-HAGH, ANDREW
Provider ID: 299508
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Ronald Reagan UCLA Medical Center,
Santa Monica UCLA Medical Center, UCSD La Jolla
John S. Sally Thornton, UCSD Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
PATEL, VIJAY
Provider ID: 297037
Board Certified Specialty: No
3030 CHILDRENS WAY STE 1
SAN DIEGO, CA 92123
Phone: (858) 309-7701
Fax: (858) 966-8038
After Hours Phone: (858) 309-7701
Provider Gender: Male
NPI: 1508250747

Website: N/A

OTOLARYNGOLOGY
VAHABZADEH-HAGH, ANDREW
Provider ID: 299509
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED CTR, UCSD LA JOLLA
SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
VAHABZADEH-HAGH, ANDREW
Provider ID: 299507
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
D3. 專業提供者目錄

Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1346506920

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR,
SANTA MONICA UCLA MED CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WATSON, DEBORAH
Provider ID: 299639
Board Certified Specialty: No
Provider Gender: Female
NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WEISSBROD, PHILIP
Provider ID: 299615
Board Certified Specialty: No
Provider Gender: Male
NPI: 1366590853

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WATSON, DEBORAH
Provider ID: 299642
Board Certified Specialty: No
Provider Gender: Female
NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WEISSBROD, PHILIP
Provider ID: 299615
Board Certified Specialty: No
Provider Gender: Male
NPI: 1366590853

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WATSON, DEBORAH
Provider ID: 299639
Board Certified Specialty: No
Provider Gender: Female
NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WEISSBROD, PHILIP
Provider ID: 299615
Board Certified Specialty: No
Provider Gender: Male
NPI: 1366590853

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WATSON, DEBORAH
Provider ID: 299642
Board Certified Specialty: No
Provider Gender: Female
NPI: 1346270816

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WEISSBROD, PHILIP
Provider ID: 299615
Board Certified Specialty: No
Provider Gender: Male
NPI: 1366590853

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

Provider ID: 299610
Board Certified Specialty: No
200 W ARBOR DR STE 505
SAN DIEGO, CA 92103
Phone: (858) 657-8590
After Hours Phone: (858) 657-8590
Provider Gender: Male
NPI: 1366590853
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
YAN, CAROL
Provider ID: 298412
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
WEISSBROD, PHILIP
Provider ID: 299614
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1366590853
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OTOLARYNGOLOGY
YAN, CAROL
Provider ID: 298413
Board Certified Specialty: No
8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1619237260
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

2066
**D3. 專業提供者目錄**

<table>
<thead>
<tr>
<th>Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</th>
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<td>Accessibility: CONTACT PROVIDER Website: N/A</td>
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**PATHOLOGY ANATOMIC**

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<tr>
<th>CLINICAL</th>
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<td>BROOME, HELEN</td>
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<tr>
<td>Provider ID: 275720 Board Certified Specialty: No</td>
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<td>Provider ID: 275721 Board Certified Specialty: No</td>
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<tr>
<td>200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273</td>
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<tr>
<td>10300 CAMPUS POINT DR SAN DIEGO, CA 92121 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273</td>
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<td>10300 CAMPUS POINT DR SAN DIEGO, CA 92121 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273</td>
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<td>10300 CAMPUS POINT DR SAN DIEGO, CA 92121 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273</td>
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<td>10300 CAMPUS POINT DR SAN DIEGO, CA 92121 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273</td>
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<tr>
<th>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</th>
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<tr>
<td>Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N</td>
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<td>Accessibility: CONTACT PROVIDER Website: N/A</td>
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**PATHOLOGY ANATOMIC**

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<th>CLINICAL</th>
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<tr>
<td>BUI, JACK</td>
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<tr>
<td>Provider ID: 247581 Board Certified Specialty: No</td>
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<thead>
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<th>PROVIDER</th>
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</thead>
<tbody>
<tr>
<td>200 W ARBOR DR SAN DIEGO, CA 92103 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273</td>
</tr>
<tr>
<td>10300 CAMPUS POINT DR SAN DIEGO, CA 92121 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273</td>
</tr>
<tr>
<td>10300 CAMPUS POINT DR SAN DIEGO, CA 92121 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273</td>
</tr>
<tr>
<td>10300 CAMPUS POINT DR SAN DIEGO, CA 92121 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273</td>
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<thead>
<tr>
<th>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</th>
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<tr>
<td>Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N</td>
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<td>Accessibility: CONTACT PROVIDER Website: N/A</td>
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<td>Provider English Spoken: Y</td>
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<tr>
<td>Medi-Cal Open Panel: Yes</td>
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<tr>
<td>Provider ID: 296765</td>
</tr>
<tr>
<td>Phone: (619) 266-3332</td>
</tr>
<tr>
<td>After Hours Phone: (619)</td>
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<tr>
<td>266-3332</td>
</tr>
<tr>
<td>Provider Gender: Male</td>
</tr>
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**PATHOLOGY ANATOMIC CLINICAL**

**BUI, JACK**

Provider ID: 247580  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1942529821  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**PATHOLOGY ANATOMIC CLINICAL**

**QUINTANA, PAULINA**

Provider ID: 296765  
Board Certified Specialty: No  
292 EUCLID AVE STE 115  
SAN DIEGO, CA 92114  
Phone: (619) 266-3332  
Fax: (619) 266-6000  
After Hours Phone: (619) 266-3332  
Provider Gender: Female  
NPI: 1164482477  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**PATHOLOGY ANATOMIC CLINICAL**

**ROMA, ANDRES**

Provider ID: 275826  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1679521579  
Provider English Spoken: Y  
Provider Language(s) Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0-999
D3. 專業提供者目錄

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC

SONG, WEI
Provider ID: 300001
Board Certified Specialty: No
10300 CAMPUS POINT DR SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1306164157
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PATHOLOGY ANATOMIC

VAVINSKAYA, VERA
Provider ID: 275789
Board Certified Specialty: No
200 W ARBOR DR SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1174757181
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PATHOLOGY ANATOMIC

CLINICAL

WANG, DEHU
Provider ID: 289153
Board Certified Specialty: No
3030 CHILDRENS WAY FL 1 SAN DIEGO, CA 92123
Phone: (858) 966-6776
Fax: (858) 966-6707
After Hours Phone: (858) 966-6776
Provider Gender: Female
NPI: 1578790655
Provider English Spoken: Y
Provider Language(s) Spoken: Chinese
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDiatric Allergy / Immunology

ALKATIB, RHONDA
Provider ID: 291226
Board Certified Specialty: No
2655 CAMINO DEL RIO N STE 425 SAN DIEGO, CA 92108
Phone: (619) 286-6687
Fax: (619) 286-6695
After Hours Phone: (619) 286-6687
Provider Gender: Female
NPI: 1417363086
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: ALVARADO HOSP MED CTR, ALVARADO HOSPITAL LLC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

PEDIATRIC ALLERGY / IMMUNOLOGY

COLLINS, CATHLEEN
Provider ID: 206083
Board Certified Specialty: No
3030 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
Phone: (858) 966-5961
After Hours Phone: (858) 966-5961
Provider Gender: Female
NPI: 1205128089
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GENG, BOB
Provider ID: 205824
Board Certified Specialty: No
3030 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
Phone: (858) 966-5961
After Hours Phone: (858) 966-5961
Provider Gender: Male
NPI: 1356570758
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GENG, BOB
Provider ID: 205823
Board Certified Specialty: No
5776 RUFFIN RD
SAN DIEGO, CA 92123
Phone: (858) 292-1144
After Hours Phone: (858) 292-1144
Provider Gender: Male
NPI: 1356570758
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY

GREINER, ALEXANDER
Provider ID: 205697
Board Certified Specialty: No
5776 RUFFIN RD
SAN DIEGO, CA 92123
Phone: (858) 966-4900
After Hours Phone: (858) 966-4900
Provider Gender: Male
NPI: 1609801299
Provider English Spoken: Y
Provider Language(s)
Spoken: French, German, Spanish
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

2070
D3. 医療提供者目録

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
├ Accessibility: CONTACT PROVIDER
├ Hours: M-F
│   8:00AM-5:00PM
│   SA 8:00AM-0:00PM
│ Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY
LEIBEL, SYDNEY
Provider ID: 205724
Board Certified Specialty: No
5776 RUFFIN RD
SAN DIEGO, CA 92123
Phone: (858) 292-1144
After Hours Phone: (858) 292-1144
Provider Gender: Male
NPI: 1861666919
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RODY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
├ Accessibility: CONTACT PROVIDER
├ Hours: M-F
│   8:00AM-5:00PM
│ Website: N/A

PEDIATRIC CARDIOLOGY
BOCK, MATTHEW
Provider ID: 280463
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1356514624
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RODY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
├ Accessibility: CONTACT PROVIDER
├ Hours: M-F
│   8:00AM-5:00PM
│ Website: N/A

PEDIATRIC ALLERGY / IMMUNOLOGY
LEIBEL, SYDNEY
Provider ID: 205725
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123
Phone: (858) 966-5961
After Hours Phone: (858) 966-5961
Provider Gender: Male
NPI: 1861666919
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RODY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
├ Accessibility: CONTACT PROVIDER
├ Hours: M-F
│   8:00AM-5:00PM
│ Website: N/A

PEDIATRIC CARDIOLOGY
BORQUEZ, ALEJANDRO
Provider ID: 284120
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
NPI: 1114277787
 Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RODY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
D3. 專業提供者目錄

PEDIATRIC CARDIOLOGY

CHAU, PETER
Provider ID: 271427
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1407146947
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY
CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR,
RADY CHILDRENS HOSPITAL
SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC CARDIOLOGY

DO, THOMAS
Provider ID: 206162
Board Certified Specialty: No
3020 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 366-5855
Fax: (858) 966-7423
After Hours Phone: (858) 366-5855
Provider Gender: Male
NPI: 1053545376
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSPITAL AT MISSION, CHILDRENS HOSPITAL OF ORANGE COUNTY
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC CARDIOLOGY

DAVIS, CHRISTOPHER
Provider ID: N/A
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1760691950
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC CARDIOLOGY

DUMMER, KIRSTEN
Provider ID: 260595
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
NPI: 1780642280
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY
CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC CARDIOLOGY

GOLDING, IAN
Provider ID: 210823
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Provider Gender: Male
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1962974956
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDDIATRIC CARDIOLOGY
GORDON, BRENT
Provider ID: 295391
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1669480083
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: POMONA VALLEY HOSP MED CTR,
SANTA MONICA UCLA MED CTR, SAN ANTONIO COMM HOSP, LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDDIATRIC CARDIOLOGY
HALEY, JESSICA
Provider ID: 205687
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
NPI: 1023329885
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDDIATRIC CARDIOLOGY
JUSTINO, HENRI
Provider ID: 284123
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1518036821
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDDIATRIC CARDIOLOGY
LEHNERT SCHUCHARDT, ELEANOR
Provider ID: 262250
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
Fax: (858) 966-7903
After Hours Phone: (858) 966-5855
Provider Gender: Female
NPI: 1760707210
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

2073
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<tr>
<td>MCCANDLESS, RACHEL</td>
<td>206147</td>
<td>No</td>
<td>Rady Children's Hospital San Diego</td>
<td>N</td>
<td>Phone: (858) 966-4912</td>
<td>0-19</td>
<td>N</td>
<td>N</td>
<td>Rady Children's Hospital San Diego</td>
<td>Phone: (858) 966-4912</td>
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<td>MUELLER, DANA</td>
<td>245535</td>
<td>No</td>
<td>Rady Children's Hospital San Diego</td>
<td>N</td>
<td>Phone: (858) 966-5855</td>
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<td>N</td>
<td>Rady Children's Hospital San Diego</td>
<td>Phone: (858) 966-5855</td>
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<td>NARAYAN, HARI</td>
<td>205349</td>
<td>No</td>
<td>Rady Children's Hospital San Diego</td>
<td>N</td>
<td>Phone: (858) 966-5855</td>
<td>0-19</td>
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<td>Rady Children's Hospital San Diego</td>
<td>Phone: (858) 966-5855</td>
<td>0-19</td>
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<tr>
<td>SAH, SERENA</td>
<td>206215</td>
<td>No</td>
<td>Rady Children's Hospital San Diego</td>
<td>N</td>
<td>Phone: (858) 966-5855</td>
<td>0-19</td>
<td>N</td>
<td>N</td>
<td>Rady Children's Hospital San Diego</td>
<td>Phone: (858) 966-5855</td>
<td>0-19</td>
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<tr>
<td>RAO, ROHIT</td>
<td>206122</td>
<td>No</td>
<td>Rady Children's Hospital San Diego</td>
<td>N</td>
<td>Phone: (858) 966-5855</td>
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<td>Rady Children's Hospital San Diego</td>
<td>Phone: (858) 966-5855</td>
<td>0-19</td>
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### D3. Professional Provider Directory

<table>
<thead>
<tr>
<th>Provider</th>
<th>Specialization</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
<th>Provider English Spoken</th>
<th>Provider Language(s)</th>
<th>Cultural Competency</th>
<th>Accessibility</th>
<th>Provider ID</th>
<th>NPI</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Hours</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Silva Sepulveda, Jose</td>
<td>Pediatric Cardiology</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
<td>0-19</td>
<td>N</td>
<td>Y</td>
<td>Chinese, Mandarin</td>
<td>N</td>
<td>Contact Provider</td>
<td>206297</td>
<td>1295042653</td>
<td></td>
<td>(858) 966-5855</td>
<td></td>
<td>(858) 966-5855</td>
<td>M-F 8:00AM-5:00PM</td>
</tr>
<tr>
<td>Steinberg, Leonard</td>
<td>Pediatric Cardiology</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
<td>0-19</td>
<td>N</td>
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<td>248208</td>
<td>1538279484</td>
<td></td>
<td>(858) 966-5855</td>
<td></td>
<td>(858) 966-5855</td>
<td>M-F 8:00AM-5:00PM</td>
</tr>
<tr>
<td>Stringer, Jesse</td>
<td>Pediatric Cardiology</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
<td>0-19</td>
<td>N</td>
<td>Y</td>
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<td>Contact Provider</td>
<td>206296</td>
<td>1972745388</td>
<td></td>
<td>(858) 966-5855</td>
<td></td>
<td>(858) 966-5855</td>
<td>M-F 9:00AM-5:00PM</td>
</tr>
<tr>
<td>Vellore Govardhan</td>
<td>Pediatric Cardiology</td>
<td>Rady Children's Hospital San Diego</td>
<td>Yes</td>
<td>0-19</td>
<td>N</td>
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<td>M-F 8:00AM-5:00PM</td>
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Note: The provider's PCP's doctor group may have its own network of mental health service providers. Please refer to the list below. Contact the providers directly. Please note that some services may require prior authorization from a mental health service provider to be covered. To access the mental health service provider list online, please visit blueshieldca.com/fad.
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<th>Phone</th>
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<td>SAN DIEGO, CA 92123</td>
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<td>(858) 966-7903</td>
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<td>1477702165</td>
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<td>(858) 966-6795</td>
<td>(858) 966-7479</td>
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D3. 專業提供者目錄

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Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC DERMATOLOGY
EICHENFIELD, DAWN
Provider ID: 303679
Board Certified Specialty: No
7910 FROST ST STE 120
SAN DIEGO, CA 92123
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Female
NPI: 1295198091
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC DERMATOLOGY
EICHENFIELD, DAWN
Provider ID: 283142
Board Certified Specialty: No
3020 CHILDREN'S WAY
SAN DIEGO, CA 92123
Phone: (858) 966-6795
Fax: (858) 966-7479
After Hours Phone: (858) 966-6795
Provider Gender: Female
NPI: 1295198091
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
AGHILI, ROXANA
Provider ID: 303780
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1851927883
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM M-F 4:00PM-10:00PM SA 1:00PM-10:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
AGHILI, ROXANA
Provider ID: 304918
Board Certified Specialty: No
3020 CHILDREN'S WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1851927883
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi
Cultural Competency: N
Hospital Affiliation: KAISER FOUNDATION HOSPITAL SAN DIEGO, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
PEDIATRIC EMERGENCY MEDICINE
AMIRNOVIN, RAMBOD
Provider ID: 297673
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1326301862
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation:
CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
BETTY, MARYANN
Provider ID: 245754
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1285014498
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 

PEDIATRIC EMERGENCY

MEDICINE

BETTY, MARYANN
Provider ID: 257396
Board Certified Specialty: No
Provider Gender: Female
NPI: 1285014498
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

BIALOSTOZKY, MARIO
Provider ID: 206011
Board Certified Specialty: No
Provider Gender: Male
NPI: 1609281450
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

CAMPBELL, SARA
Provider ID: 206335
Board Certified Specialty: No
Provider Gender: Female
NPI: 1841687563
Provider English Spoken: Y
Provider Language(s) Spoken: Farsi, Spanish
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY

MEDICINE

BRYL, AMY
Provider ID: 205967
Board Certified Specialty: No
Provider Gender: Female
NPI: 1497079487
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

CHOO, SUN
Provider ID: 296535
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1700047628
Provider English Spoken: Yes
Cultural Competency: No
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
CHOO, SUN
Provider ID: 296536
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1700047628
Provider English Spoken: Yes
Cultural Competency: No
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTH WEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
CONRAD, HEATHER
Provider ID: 205960
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1205813409
Provider English Spoken: Yes
Cultural Competency: No
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL, UCSF BENIOFF CHILDREN©S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
DEL RE, ANGELO
Provider ID: 206081
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1275761371
Provider English Spoken: Yes
Cultural Competency: No
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
DEVERA, GEMMIE
D3. 專業提供者目錄

Provider ID: 288572
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1366622078
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDiatric Emergency Medicine
Donofrio-odmann, joy
Provider ID: 205375
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1740571165
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDiatric Emergency Medicine
EKPenyong, atim
Provider ID: 205722
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Provider Gender: Female
NPI: 1932318565
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Martin Luther King Jr Community Hospital, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

DORWART, Elizabeth
Provider ID: 294260
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1609132034
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: LUCILE SALTER PACKARD CHILDRENS HOSP, Stanford Health Care, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDiatric Emergency Medicine
EKpenyong, Atim
### Cultural Competency: N

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**您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。**
D3. 專業提供者目錄

PEDIATRIC EMERGENCY MEDICINE
GROSS, MATTHEW
Provider ID: 297172
Board Certified Specialty: No
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD Medical Ctr
Min/Max Age: 0\19
American Sign Language (ASL): Y
Provider English Spoken: Y
Cultural Competency: N
NPI: 1942223664
Provider Gender: Male

PEDIATRIC EMERGENCY MEDICINE
HUNTER, WENDY
Provider ID: 206278
Board Certified Specialty: No
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD Medical Ctr
Min/Max Age: 0\19
American Sign Language (ASL): N
Provider English Spoken: Y
Cultural Competency: N
NPI: 1053515551
Provider Gender: Female

PEDIATRIC EMERGENCY MEDICINE
HERSKOVITZ, SCOTT
Provider ID: 261045
Board Certified Specialty: Yes
Hospital Affiliation: UCSF Benioff Children's Hospital Oakland, Rady Children's Hospital San Diego
Min/Max Age: 0\19
American Sign Language (ASL): N
Provider English Spoken: Y
Cultural Competency: N
NPI: 1225393499
Provider Gender: Male

PEDIATRIC EMERGENCY MEDICINE
INDRA, SEAN
Provider ID: 302625
Board Certified Specialty: No
Hospital Affiliation: Rady Children's Hospital San Diego
Min/Max Age: 0\19
American Sign Language (ASL): N
Provider English Spoken: Y
Cultural Competency: N
NPI: 1427349091
Provider Gender: Male
D3. 專業提供者目錄

- Provider English Spoken: Y  
  Cultural Competency: N
  Hospital Affiliation: Rady Childreens Hospital San Diego, Valley Childrens Hospital
  Medi-Cal Open Panel: No
  Min/Max Age: 0-19
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Website: N/A

**PEDIATRIC EMERGENCY MEDICINE**

**ISHIMINE, PAUL**
Provider ID: 206236  
Board Certified Specialty: No
3020 Childrens Way  
San Diego, CA 92123  
Phone: (858) 966-8800  
After Hours Phone: (858) 966-8800  
Provider Gender: Male  
NPI: 1437184421
- Provider English Spoken: Y  
  Cultural Competency: N
  Hospital Affiliation: UCSD Medical CTR, Rady Childreens Hospital San Diego
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0-19
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM  
  Website: N/A

**PEDIATRIC EMERGENCY MEDICINE**

**JACKSON, TAYLOR**
Provider ID: 302127  
Board Certified Specialty: No
3020 Childrens Way  
San Diego, CA 92123  
Phone: (858) 966-5999  
Fax: (858) 966-8519  
After Hours Phone: (858) 966-5999
Provider Gender: Male  
NPI: 1326543752
- Provider English Spoken: Y  
  Cultural Competency: N
  Hospital Affiliation: Rady Childreens Hospital San Diego
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0-19
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM  
  Website: N/A

**JOSHI, WEENA**
Provider ID: 262232  
Board Certified Specialty: No
3020 Childrens Way  
San Diego, CA 92123  
Phone: (858) 966-8800  
After Hours Phone: (858) 966-8800
Provider Gender: Female  
NPI: 1376862177
- Provider English Spoken: Y  
  Cultural Competency: N
  Hospital Affiliation: Rady Childreens Hospital San Diego, Palomar Health
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0-19
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM  
  Website: N/A

**JOSHI, WEENA**
Provider ID: 262234  
Board Certified Specialty: No
4305 University Ave Ste 150  
San Diego, CA 92105  
Phone: (619) 280-2905  
Fax: (619) 283-1614  
After Hours Phone: (619) 280-2905
Provider Gender: Female  
NPI: 1376862177
- Provider English Spoken: Y  
  Cultural Competency: N
  Hospital Affiliation: Rady Childreens Hospital San Diego, Palomar Health
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0-19
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F
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<th>Provider ID</th>
<th>Name</th>
<th>Gender</th>
<th>NPI</th>
<th>Specialty</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
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<tr>
<td>294094</td>
<td>KHAN, SHAHFAR</td>
<td>Female</td>
<td>1013361815</td>
<td>No</td>
<td>Rady Childrens Hospital San Diego</td>
<td>Yes</td>
<td>0\19</td>
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<tr>
<td>302317</td>
<td>KINGDON, JOANNA</td>
<td>Female</td>
<td>1790856557</td>
<td>No</td>
<td>Rady Childrens Hospital San Diego, UCSD Medical Ctr</td>
<td>Yes</td>
<td>0\19</td>
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<td>262029</td>
<td>LOVEJOY, AMY</td>
<td>Female</td>
<td>1790856557</td>
<td>No</td>
<td>Rady Childrens Hospital San Diego</td>
<td>Yes</td>
<td>0\19</td>
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<tr>
<td>206107</td>
<td>LOVEJOY, AMY</td>
<td>Female</td>
<td>1790856557</td>
<td>No</td>
<td>Rady Childrens Hospital San Diego, Childrens Hospital of Orange County</td>
<td>Yes</td>
<td>0\19</td>
<td></td>
</tr>
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</table>
D3. 專業提供者目錄

Provider ID: 248071
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1366761959
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADI
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
  Hours: SU 1:00PM-10:00PM
    M-F 4:00PM-10:00PM
    SA 1:00PM-10:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE
MENDES, CHANTAL
Provider ID: 295668
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1134681265

PEDIATRIC EMERGENCY MEDICINE
MESIWALA, ADNAN
Provider ID: 275654
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1528483955
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADI
CHILDRENS HOSPITAL SAN
DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
  Hours: M-F
    8:00AM-5:00PM
 Website: N/A

PEDIATRIC EMERGENCY MEDICINE
MILLS, DAVID
Provider ID: 302146
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1073740205
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADI
CHILDRENS HOSPITAL SAN
DIEGO, SOUTHWEST
HEALTHCARE INLAND VALLEY
HOSPITAL, SOUTHWEST
HEALTHCARE RANCHO
SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
  Hours: M-F
    8:00AM-5:00PM
 Website: N/A

---

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
Provider ID: 205334
Board Certified Specialty: No
Provider Gender: Female
NPI: 1689646689
Provider English Spoken: Y
Provider Language(s) Spoken: French
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Website: N/A

MEDICINE
MINKA, GENEVIEVE
Provider ID: 205334
Board Certified Specialty: No
Provider Gender: Female
NPI: 1689646689
Provider English Spoken: Y
Provider Language(s) Spoken: French
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Website: N/A

MEDICINE
MISHRA-OCCHINO, SEEMA
Provider ID: 205404
Board Certified Specialty: No
Provider Gender: Female
NPI: 1689612830
Provider English Spoken: Y
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Website: N/A

MEDICINE
MINKA, GENEVIEVE
Provider ID: 205336
Board Certified Specialty: No
Provider Gender: Female
NPI: 1689612830
Provider English Spoken: Y
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Website: N/A

MEDICINE
MISHRA-OCCHINO, SEEMA
Provider ID: 205404
Board Certified Specialty: No
Provider Gender: Female
NPI: 1689612830
Provider English Spoken: Y
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
MONTBLEAU, KARA
Provider ID: 299240
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1164981197
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
MURRAY, MATTHEW
Provider ID: 205759
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1215103023
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, RODY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
NGUYEN, MYLINH
Provider ID: 262299
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1730428053
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
NGUYEN, MARGARET
Provider ID: 270705
Board Certified Specialty: No
3020 CHILDRENS WAY SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1942485248
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
OZAKI, YOSHIHIRO
Provider ID: 241926
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Male
NPI: 1467898239
Provider English Spoken: Y
Provider Language(s) Spoken: Japanese
Cultural Competency: N
Hospital Affiliation: VALLEY CHILDRENS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDiatric EMERGENCY MEDICINE
PADE, KATHRYN
Provider ID: 262411
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1215375183
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDiatric EMERGENCY MEDICINE
OZCAN, ALI
Provider ID: 287923
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1265867683
Provider English Spoken: Y
Provider Language(s) Spoken: Turkish
Cultural Competency: N
Hospital Affiliation: RADI CHILDRENS HOSPITAL SAN DIEGO, LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDiatric EMERGENCY MEDICINE
PARK, BRIAN
Provider ID: 302352
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1710418744
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDiatric EMERGENCY MEDICINE
PARK, RONALD
Provider ID: 295457
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
D3. 專業提供者目錄

- **After Hours Phone:** (619) 280-2905
  - Provider Gender: Male
  - NPI: 1881695914
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Hospital Affiliation: TRI CITY MEDICAL CTR, RADY CHILDRESS HOSPITAL SAN DIEGO
  - Medi-Cal Open Panel: No
  - Min/Max Age: 0\19
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 8:00AM-5:00PM
  - Website: N/A

- **MEDICINE
QUINONES-PEREZ, BIANCA**
  - Provider ID: 206947
  - Board Certified Specialty: No
  - 4305 UNIVERSITY AVE STE 150
  - SAN DIEGO, CA 92105
  - Phone: (619) 280-2905
  - Fax: (619) 283-1614
  - After Hours Phone: (619) 280-2905
  - Provider Gender: Female
  - NPI: 1124360565
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Hospital Affiliation: RADY CHILDRESS HOSPITAL SAN DIEGO
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\19
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F 4:00PM-10:00PM
  - Website: N/A

- **PEDIATRIC EMERGENCY
MEDICINE
QUINONES-PEREZ, BIANCA**
  - Provider ID: 206949
  - 3020 CHILDRENS WAY
  - SAN DIEGO, CA 92123
  - Phone: (858) 966-8800
  - Fax: (619) 280-2905
  - Provider Gender: Female
  - NPI: 1124360565
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Hospital Affiliation: RADY CHILDRESS HOSPITAL SAN DIEGO
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\19
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: SU 1:00PM-10:00PM
  - Website: N/A

- **PEDIATRIC EMERGENCY
MEDICINE
RANASURIYA, DUNISHA**
  - Provider ID: 216970
  - 3020 CHILDRENS WAY
  - SAN DIEGO, CA 92123
  - Phone: (858) 966-8800
  - After Hours Phone: (858) 966-8800
  - Provider Gender: Female
  - NPI: 1477626513
  - Provider English Spoken: Y
  - Provider Language(s) Spoken: Spanish
  - Cultural Competency: N
  - Hospital Affiliation: GLENDALE ADVENTIST MED CTR, GLENDALE MEMORIAL HOSP AND HEALTH CTR, TRI CITY MEDICAL CTR, RADY
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\19
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
NPI: 1740468057
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

RATNAYAKE, KRISTIN
Provider ID: 206034
Board Certified Specialty: No
3020 CHILDRENS WAY MC 5075
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1679716658
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RUIZ, MONICA
Provider ID: 305340
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1982059689
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

RUSSELL, SAMUEL
Provider ID: 301250
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Male
NPI: 1215564265
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
PEDIATRIC EMERGENCY MEDICINE

SALEH, FAREED
Provider ID: 206216
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1366691115
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SANACORA, RACHEL
Provider ID: 297728
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1548987985
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SCHROTER, STEPHANIE
Provider ID: 243830
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1073951828
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SANACORA, RACHEL
Provider ID: 297729
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1548987985
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE

SCHWARTZ, KRISTY
Provider ID: 206169
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1073951828
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1497080808
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RODY
CHILDREN's Hospital San Diego, UCSF Medical CTR, Southwest Healthcare Inland Valley Hospital, UCSF Benioff Children's Hospital Oakland, Southwest Healthcare Rancho Springs Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
SHETH, SARIKA
Provider ID: 248171
Board Certified Specialty: No
3020 Childrens Way
San Diego, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1336503234
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
SHERER, KIMBERLY
Provider ID: 284168
Board Certified Specialty: No
3020 Childrens Way
San Diego, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1992202964
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RODY

CHILDREN'S Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

966-8800
Provider Gender: Male
NPI: 1851540199
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF Benioff Children's Hospital Oakland
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC EMERGENCY MEDICINE
SOUDER, CHRISTOPHER
Provider ID: 301635
Board Certified Specialty: No
3030 Childrens Way FL 3
San Diego, CA 92123
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
NPI: 1851540199
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF Benioff Children's Hospital Oakland
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

PEDiatric EMERgency MEDICINE

TAMAS, VANESSA
Provider ID: 206212
Board Certified Specialty: No
3020 CHILDREN'S WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Provider Gender: Female
NPI: 1184071516
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDiatric EMERgency MEDICINE

TODD, SARAH
Provider ID: 302800
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1407299787
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

PEDiatric EMERgency MEDICINE

TRAN, THERESA
Provider ID: 301834
Board Certified Specialty: No
3020 CHILDREN'S WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1417496985
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Vietnamese
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

**PEDIATRIC EMERGENCY MEDICINE**

**TRAUT, JOEL**
Provider ID: 205475
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Provider Gender: Male
NPI: 1982792065
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

**VAIDYA, KAMALA**
Provider ID: 205809
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 1:00PM-10:00PM
M-F 4:00PM-10:00PM
SA 1:00PM-10:00PM
Website: N/A

**VAN WOY, LAUREN**
Provider ID: 301574
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1568959161
Provider Language(s) Spoken: Spanish

**PEDIATRIC EMERGENCY MEDICINE**

**VAIDYA, KAMALA**
Provider ID: 205811
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1083840920
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0-19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**PEDIATRIC EMERGENCY MEDICINE**

**ULRICH, STACEY**
Provider ID: 205847
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8036
After Hours Phone: (858) 966-8036
Provider Gender: Female
NPI: 1619049236
Provider English Spoken: Y
Cultural Competency: N
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<th>Address</th>
<th>Phone</th>
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<td>VANE, JACKSON</td>
<td>205883</td>
<td>No</td>
<td>PALOMAR HEALTH, PALOMAR MEDICAL CENTER, Rady Childrens Hospital San Diego</td>
<td>3020 Childrens Way Fl 2, San Diego, CA 92123</td>
<td>(858) 966-8800</td>
<td>(858) 966-8479</td>
<td>(858) 576-1700</td>
<td>Male</td>
<td>1952608580</td>
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<tr>
<td>VARGAS, JACLYN</td>
<td>285934</td>
<td>No</td>
<td>PALOMAR HEALTH, PALOMAR MEDICAL CENTER, Rady Childrens Hospital San Diego</td>
<td>3020 Childrens Way Fl 2, San Diego, CA 92123</td>
<td>(858) 966-5841</td>
<td>(858) 966-6728</td>
<td>(858) 966-5841</td>
<td>Female</td>
<td>1619359718</td>
<td>No</td>
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<td>VARGAS, JACLYN</td>
<td>296486</td>
<td>No</td>
<td>Rady Childrens Hospital San Diego, Los Angeles General Medical Center</td>
<td>4305 University Ave Ste 150, San Diego, CA 92105</td>
<td>(619) 280-2905</td>
<td>(619) 283-1614</td>
<td>(619) 280-2905</td>
<td>Female</td>
<td>1619359718</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
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D3. 專業提供者目錄

PROVIDER

VAYNGORTIN, TATYANA
Provider ID: 263012
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1578967907
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

WANG, YVETTE
Provider ID: 263416
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1710321278
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

WANG, EMILY
Provider ID: 265952
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2905
Fax: (619) 283-1614
After Hours Phone: (619) 280-2905
Provider Gender: Female
NPI: 1427142363
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F

PEDIATRIC EMERGENCY MEDICINE
PEDIATRIC EMERGENCY MEDICINE

YAPHOCKUN, KAREN
Provider ID: 206184
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Provider Gender: Female
NPI: 1861880817
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RAY
CHILDRN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC ENDOCRINOLOGY

PATTERSON, MARY
Provider ID: 206059
Board Certified Specialty: No
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
NPI: 1912112020
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RAY
CHILDRN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC ENDOCRINOLOGY

SINGH, PUJA
Provider ID: 302818
Board Certified Specialty: No
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
NPI: 1841721172
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RAY
CHILDRN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC ENDOCRINOLOGY

VARGAS TRUJILLO, MARCELA
Provider ID: 205605
Board Certified Specialty: No
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-4032
After Hours Phone: (858) 966-4032
Provider Gender: Female

D3. Professional Providers Directory

Provider Gender: Female
NPI: 1952534091
- Provider English Spoken: Y
- Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, Rady CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**PEDIATRIC GASTROENTEROLOGY**

**CHU, CHRISTOPHER**
Provider ID: 301639
Board Certified Specialty: No
- 3030 CHILDRENS WAY FL 2
  SAN DIEGO, CA 92123
- Phone: (858) 966-4003
  Fax: (858) 560-6798
- After Hours Phone: (858) 966-4003

Provider Gender: Male
NPI: 1912369273
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish, Yue Chinese
- Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19

**GOYAL, NIDHI**
Provider ID: 294228
Board Certified Specialty: No
- 3030 CHILDRENS WAY FL 2 SOUTH
  SAN DIEGO, CA 92123
- Phone: (858) 966-4003
  Fax: (858) 560-6798
- After Hours Phone: (858) 966-4003

Provider Gender: Female
NPI: 1598029332
- Provider English Spoken: Y
- Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**HARTMANN, PHILLIPP**
Provider ID: 294228
Board Certified Specialty: No
- 3030 CHILDRENS WAY FL 2
  SAN DIEGO, CA 92123
- Phone: (858) 966-4003
  Fax: (858) 560-6798
- After Hours Phone: (858) 966-4003

Provider Gender: Male
NPI: 1356796536
- Provider English Spoken: Y
- Provider Language(s) Spoken: French, German
- Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

**LIN, TOM**
Provider ID: 297707
Board Certified Specialty: No
- 3030 CHILDRENS WAY FL 2
  SAN DIEGO, CA 92123
- Phone: (858) 966-4003
  Fax: (858) 560-6798
- After Hours Phone: (858) 966-4003

Provider Gender: Male
PEDIATRIC
GASTROENTEROLOGY
PATHAK, SAGAR
Provider ID: 301825
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Male
NPI: 1700318292
Provider English Spoken: Y
Provider Language(s) Spoken: Gujarati, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC
GASTROENTEROLOGY
SCHWARZ, KATHLEEN
Provider ID: 205885
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-4003
Fax: (858) 560-6798
After Hours Phone: (858) 966-4003
Provider Gender: Female
NPI: 1265465918
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC
HEMATOLOGY / ONCOLOGY
BRIGGS, BENJAMIN
Provider ID: 274689
Board Certified Specialty: No
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
NPI: 1952695777
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
DIEGO, NAVAL MEDICAL CTR
SD RBE
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY
BUSH, KELLY
Provider ID: 274408
Board Certified Specialty: No
3010 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1073831079
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY
CHOO, SUN
Provider ID: 206115
Board Certified Specialty: No
3010 CHILDRENS WAY STE 2-WEST
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1700047628
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC HEMATOLOGY / ONCOLOGY
ELSTER, JENNIFER
Provider ID: 205769
Board Certified Specialty: No
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1588866115
 Provider English Spoken: Y
 Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A
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<td>Ganesan, Anusha</td>
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<td>Children's Hospital San Diego, UCSD Medical CTR</td>
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PEDIATRIC HEMATOLOGY / ONCOLOGY

YU, HELENA
Provider ID: 301583
Board Certified Specialty: No
3010 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1881127736
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

YU, JENNIFER
Provider ID: 206148
Board Certified Specialty: No
3010 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1326315599
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

ZAGE, PETER
Provider ID: 206315
Board Certified Specialty: No
3010 CHILDRENS WAY STE 2W
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Male
NPI: 1912003161
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC NEPHROLOGY
INGULLI, ELIZABETH
Provider ID: 302778
Board Certified Specialty: No
8110 BIRMINGHAM WAY STE 28
SAN DIEGO, CA 92123
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
NPI: 1811919244
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC NEPHROLOGY
PERENS, ELLIOT
Provider ID: 302765
Board Certified Specialty: No
8110 BIRMINGHAM WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-8052
Fax: (858) 966-7789
After Hours Phone: (858) 966-8052
Provider Gender: Female
NPI: 1922328947
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

PEDIATRIC NEPHROLOGY
MAK, ROBERT
Provider ID: 302776
Board Certified Specialty: No
8110 BIRMINGHAM WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-8052
After Hours Phone: (858) 966-7789
Provider Gender: Male
NPI: 1740295252
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO
 Medi-Cal Open Panel: Yes
 Min/Max Age: 0\19
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

OAKLAND, MEDICAL CTR AT UCSF, SHARP MEMORIAL HOSPITAL, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC PULMONOLOGY
AKONG, KATHRYN
Provider ID: 205673
Board Certified Specialty: No
3030 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1912169061
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC PULMONOLOGY
BHATTACHARJEE, RAKESH
Provider ID: 205950
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Male
NPI: 1588781173
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRIC PULMONOLOGY
CERNELC KOHAN, MATEJKA
Provider ID: 243042
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1871752451
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC PULMONOLOGY
BHATTACHARJEE, RAKESH
Provider ID: 246060
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
After Hours Phone: (858) 576-1700
Provider Gender: Male
NPI: 1588781173
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRIC PULMONOLOGY
CERNELC KOHAN, MATEJKA
D3. 專業提供者目錄

**PEDIATRIC PULMONOLOGY**

**CHENG, EULALIA**
Provider ID: 205827
Board Certified Specialty: No
3030 CHILDRENS WAY STE 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1750394862
Provider English Spoken: Y

**Cultural Competency:** N
**Hospital Affiliation:** UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, Rady CHILDREN'S HOSPITAL SAN DIEGO
**Medi-Cal Open Panel:** Yes
Min/Max Age: 0\19
**American Sign Language (ASL):** N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

**PEDIATRIC PULMONOLOGY**

**FINCH, CHRISTINA**
Provider ID: 302581
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1598255325
Provider English Spoken: Y

**Cultural Competency:** N
**Hospital Affiliation:** Rady CHILDREN'S HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
**Medi-Cal Open Panel:** Yes
Min/Max Age: 0\19
**American Sign Language (ASL):** N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

**PEDIATRIC PULMONOLOGY**

**FIREIZEN, YARON**
Provider ID: 302329
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Male
NPI: 1699123927
Provider English Spoken: Y

**Cultural Competency:** N
**Hospital Affiliation:** Rady CHILDREN'S HOSPITAL SAN DIEGO
**Medi-Cal Open Panel:** Yes
Min/Max Age: 0\19
**American Sign Language (ASL):** N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A

**PEDIATRIC PULMONOLOGY**

**LANDEO GUTIERREZ, JEREMY**
Provider ID: 284176
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Male
NPI: 1255750360

**Cultural Competency:** N
**Hospital Affiliation:** Rady CHILDREN'S HOSPITAL SAN DIEGO, UCSD MEDICAL CTR
**Medi-Cal Open Panel:** Yes
Min/Max Age: 0\19
**American Sign Language (ASL):** N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM
Website: N/A
### D3. Professional Provider Directory

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<tr>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Hospital Affiliation</th>
<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
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<th>Accessibility</th>
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<td>284177</td>
<td>No</td>
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<td>Yes</td>
<td>0\19</td>
<td>N</td>
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<td>No</td>
<td>RADY CHILDREN'S HOSPITAL SAN DIEGO</td>
<td>Yes</td>
<td>0\19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F</td>
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<td>No</td>
<td>RADY CHILDREN'S HOSPITAL SAN DIEGO</td>
<td>Yes</td>
<td>0\19</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F</td>
<td>N/A</td>
</tr>
</tbody>
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#### PEDIATRIC PULMONOLOGY

**LENHART-PENDERGRASS, PATRICIA**
Provider ID: 294641
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 966-8457
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1144615659
Provider English Spoken: Y
Cultural Competency: N

**RAO, APARNA**
Provider ID: 206123
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 569-9052
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1649222340
Provider English Spoken: Y
Provider Language(s): Spoken: Hindi
Cultural Competency: N
PEDIATRIC PULMONOLOGY
RYU, JULIE
Provider ID: 206218
Board Certified Specialty: No
3030 CHILDRENS WAY FL 2 NORTH
SAN DIEGO, CA 92123
Phone: (858) 966-5846
Fax: (858) 569-5847
After Hours Phone: (858) 966-5846
Provider Gender: Female
NPI: 1568533321
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRIC RHEUMATOLOGY
CHANG, JOHANNA
Provider ID: 246394
Board Certified Specialty: No
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-8082
Fax: (858) 966-4067
After Hours Phone: (858) 966-8082
Provider Gender: Female
NPI: 1821242199
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRICS
ALAGIRI, MADHU
Provider ID: 206387
Board Certified Specialty: No
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 966-7484
Fax: (858) 966-4064
After Hours Phone: (858) 966-2108

D3. 專業提供者目錄
966-7484
Provider Gender: Male
NPI: 1619083961
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, RADY
CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRICS
ALLSUP, VICTORIA
Provider ID: 302345
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1437786944
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRICS
ANDREE, GREGOR
Provider ID: 293219
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Provider Gender: Male
NPI: 1467436063
Provider English Spoken: Y
Provider Language(s) Spoken: German, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Website: N/A

PEDIATRICS
BEAUCHAMP WALTERS, JULIA
Provider ID: 270063
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
D3. 專業提供者目錄

Provider Gender: Female  
NPI: 1457420713

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Rady Childrens Hospital San Diego  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**PEDIATRICS**

**CANTU, ALICIA**

Provider ID: 205752  
Board Certified Specialty: No  
3020 Childrens Way  
San Diego, CA 92123  
Phone: (858) 966-8800  
After Hours Phone: (858) 966-8800  
Provider Gender: Female  
NPI: 1922179688  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Rady Childrens Hospital San Diego  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**CANTU, ALICIA**

Provider ID: 205752  
Board Certified Specialty: No  
3020 Childrens Way  
San Diego, CA 92123  
Phone: (858) 966-8800  
After Hours Phone: (858) 966-8800  
Provider Gender: Female  
NPI: 1922179688  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Rady Childrens Hospital San Diego  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**PEDIATRICS**

**CHONG, AMY**

Provider ID: 259993  
Board Certified Specialty: No  
3020 Childrens Way  
San Diego, CA 92123  
Phone: (858) 966-5803  
Fax: (858) 966-5992  
After Hours Phone: (858) 966-5803  
Provider Gender: Female  
NPI: 1720423288  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Rady Childrens Hospital San Diego  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A
D3. 專業提供者目錄

PEDIATRICS

DOAN STEPHENS, CRYSTAL  
Provider ID: 293275  
Board Certified Specialty: No  
Address: 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 810-8700  
Fax: (858) 633-4680  
After Hours Phone: (858) 810-8700  
Provider Gender: Female  
NPI: 1730570144  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

PEDIATRICS

DOAN STEPHENS, CRYSTAL  
Provider ID: 293275  
Board Certified Specialty: No  
Address: 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 810-8700  
Fax: (858) 633-4680  
After Hours Phone: (858) 810-8700  
Provider Gender: Female  
NPI: 1730570144  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

PEDIATRICS

DOSHI, AMI  
Provider ID: 205329  
Board Certified Specialty: No  
Address: 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
Phone: (858) 966-5841  
Fax: (858) 966-6728  
After Hours Phone: (858) 966-5841  
Provider Gender: Female  
NPI: 1801099676  
Provider English Spoken: Y  
Provider Language(s) Spoken: Gujarati, Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

PEDIATRICS

DOSHI, AMI  
Provider ID: 205330  
Board Certified Specialty: No  
Address: 3030 CHILDRENS WAY STE 300  
SAN DIEGO, CA 92123  
Phone: (858) 966-8974  
Fax: (858) 966-6721  
After Hours Phone: (858) 966-8974  
Provider Gender: Female  
NPI: 1801099676  
Provider English Spoken: Y  
Provider Language(s) Spoken: Gujarati, Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

PEDIATRICS

GIBONEY, JENNIFER  
Provider ID: 296242  
Board Certified Specialty: No  
Address: 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (619) 280-2058  
Fax: (858) 633-4682  
After Hours Phone: (619) 280-2058  
Provider Gender: Female  
NPI: 1275895849  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

PEDIATRICS

GIBONEY, JENNIFER  
Provider ID: 296242  
Board Certified Specialty: No  
Address: 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (619) 280-2058  
Fax: (858) 633-4682  
After Hours Phone: (619) 280-2058  
Provider Gender: Female  
NPI: 1275895849  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

PEDIATRICS

PEDIATRICS

GIBONEY, JENNIFER  
Provider ID: 296242  
Board Certified Specialty: No  
Address: 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (619) 280-2058  
Fax: (858) 633-4682  
After Hours Phone: (619) 280-2058  
Provider Gender: Female  
NPI: 1275895849  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

PEDIATRICS

GIBONEY, JENNIFER  
Provider ID: 296242  
Board Certified Specialty: No  
Address: 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (619) 280-2058  
Fax: (858) 633-4682  
After Hours Phone: (619) 280-2058  
Provider Gender: Female  
NPI: 1275895849  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:30AM-5:30PM
TU 5:30PM-8:30PM
W 8:30AM-5:30PM
TH 5:30PM-8:30PM
F 8:30AM-5:30PM
SA 9:00AM-4:00PM
Website: N/A

PEDIATRICS
GIBONEY, JENNIFER
Provider ID: 296241
Board Certified Specialty: No
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Provider Gender: Female
NPI: 1275895849
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRICS
GRAY, SARAH
Provider ID: 284224
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1508210311
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRICS
HUANG, MARIA
Provider ID: 205974
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1770841140
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRICS
JIMENEZ BACARDI, ADRIA
Provider ID: 294640
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Male
NPI: 1467847293
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: ST MARYS HOSPITAL AND MEDICAL CENTER, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

PEDIATRICS
JINDAL, ANUJA
Provider ID: 303285
Board Certified Specialty: No
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-5819
Fax: (858) 966-4930
After Hours Phone: (858) 966-5819
Provider Gender: Female
NPI: 1194046581
Provider Language(s)
Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
Website: N/A

PEDIATRICS
KARMAKAR, KANKA
Provider ID: 213847
Board Certified Specialty: No
10737 CAMINO RUIZ STE 235
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (858) 578-4417
After Hours Phone: (844) 200-2426
Provider Gender: Female
NPI: 1972536654
Provider Language(s)
Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
Website: N/A

PEDIATRICS
KHARE, MANASWITHA
Provider ID: 206289
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1912345307
Provider Language(s)
Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU
8:30AM-5:30PM
W 10:00AM-7:00PM
TH-F 8:30AM-5:30PM
Website: N/A

PEDIATRICS
LEE, BEGEM
Provider ID: 205923
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1053672444
Provider Language(s)
Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PEDIATRICS
LOPEZ, XIMENA
Provider ID: 302856
Board Certified Specialty: No
3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (858) 966-4032
Fax: (858) 966-6227
After Hours Phone: (858) 966-4032
Provider Gender: Female
NPI: 1053672444
Provider Language(s)
Spoken: Bengali, Hindi, Polish, Spanish, Tagalog
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
### PEDIATRICS

#### MARANO, RACHEL

- **Provider ID:** 302438
- **Board Certified Specialty:** No
- **Address:** 3020 CHILDRENS WAY SAN DIEGO, CA 92123
- **Phone:** (858) 966-5841
- **Fax:** (858) 966-6728
- **After Hours Phone:** (858) 966-5841
- **Provider Gender:** Female
- **NPI:** 1043673528
- **Provider English Spoken:** Y
- **Hospital Affiliation:** HOLLYWOOD PRESBYTERIAN MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO

#### NGO, MAI

- **Provider ID:** 302113
- **Board Certified Specialty:** No
- **Address:** 3020 CHILDRENS WAY SAN DIEGO, CA 92123
- **Phone:** (858) 966-8974
- **Fax:** (858) 966-4051
- **After Hours Phone:** (858) 966-8974
- **Provider Gender:** Female
- **NPI:** 1508910787
- **Provider English Spoken:** Y
- **Hospital Affiliation:** UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, RADY CHILDRENS HOSPITAL SAN DIEGO

#### MARC AURELE, KRISHELLE

- **Provider ID:** 301719
- **Board Certified Specialty:** No
- **Address:** 7910 FROST ST STE 230 SAN DIEGO, CA 92123
- **Phone:** (800) 926-8273
- **Fax:** (888) 539-8781
- **After Hours Phone:** (800) 926-8273
- **Provider Gender:** Female
- **NPI:** 1952503435
- **Provider English Spoken:** Y
- **Hospital Affiliation:** UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, MEDICAL CTR AT UCSF, RADY CHILDRENS HOSPITAL SAN DIEGO
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRICS
NGO, MAI
Provider ID: 302114
Board Certified Specialty: No
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
Fax: (858) 966-6721
After Hours Phone: (858) 966-8974
Provider Gender: Female
NPI: 1508910787
Provider English Spoken: Y
Provider Language(s) Spoken: Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND, MEDICAL CTR AT UCSF, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRICS
PIERCE, HEATHER
Provider ID: 205865
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1871813105
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRICS
POLICH, MICHELLE
Provider ID: 286390
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1780118018
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PEDIATRICS
RHEE, KYUNG
Provider ID: 206114
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
D3.  Professional Provider Directory

After Hours Phone: (858) 966-5841
Provider Gender: Female
NPI: 1013996529
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD Medical CTR, Palomar Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Pediatrics

Rungvivatjarus, Tiranun
Provider ID: 206319
Board Certified Specialty: No
3020 Childrens Way
San Diego, CA 92123
Provider Gender: Female
NPI: 1407276363
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Pediatrics

Stover, Laurie
Provider ID: 206196
Board Certified Specialty: No
3020 Childrens Way
San Diego, CA 92123
Provider Gender: Female
NPI: 1659442317
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

Provider Gender: Male
NPI: 1881893477
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Palomar Health, Southwest HealthCare Rancho Springs Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Southwest HealthCare Inland Valley Hospital, Southwest HealthCare Inland Valley Hospital Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Pediatrics

Song, Richard
Provider ID: 301716
Board Certified Specialty: No
7910 Frost St Ste 230
San Diego, CA 92123
Provider Gender: Female
NPI: 1881893477
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, Palomar Health, Southwest HealthCare Rancho Springs Hospital, Scripps Memorial Hospital, Scripps Memorial Hospital Encinitas, Palomar Medical Center, Southwest HealthCare Inland Valley Hospital, Southwest HealthCare Inland Valley Hospital Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Provider Gender: Male
NPI: 1376705483
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD Medical CTR, Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Provider ID: 206082
Board Certified Specialty: No
3020 Childrens Way
San Diego, CA 92123
Phone: (858) 966-5841
Fax: (858) 966-6728
After Hours Phone: (858) 966-5841
Provider Gender: Male
NPI: 1407276363
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

2116
D3. 專業提供者目錄

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**PEDIATRICS**

**SUTTNER, DENISE**
Provider ID: 301721
Board Certified Specialty: No
Provider ID: 301721
Board Certified Specialty: No

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<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
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<td>SAN DIEGO, CA 92123</td>
<td>(858) 576-1700</td>
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<tr>
<td>3665 KEARNY VILLA RD</td>
<td>STE 500</td>
<td>(858) 966-5980</td>
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<td>(858) 966-5980</td>
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**VEGA, SARAH**
Provider ID: 297078
Board Certified Specialty: No
Provider ID: 297078
Board Certified Specialty: No

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**VEGA, SARAH**
Provider ID: 297078
Board Certified Specialty: No
Provider ID: 297078
Board Certified Specialty: No

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**WEISS, KATHERINE**
Provider ID: 301703
Board Certified Specialty: No
Provider ID: 301703
Board Certified Specialty: No

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<td>(888) 539-8781</td>
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**VEGA, SARAH**
Provider ID: 297078
Board Certified Specialty: No
Provider ID: 297078
Board Certified Specialty: No

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**VEGA, SARAH**
Provider ID: 297078
Board Certified Specialty: No
Provider ID: 297078
Board Certified Specialty: No

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**WEISS, KATHERINE**
Provider ID: 301703
Board Certified Specialty: No
Provider ID: 301703
Board Certified Specialty: No

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**VEGA, SARAH**
Provider ID: 297078
Board Certified Specialty: No
Provider ID: 297078
Board Certified Specialty: No

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
ALGRA, JEFFREY
Provider ID: 287524
Board Certified Specialty: No
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Male
NPI: 1457664518
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
ALGRA, JEFFREY
Provider ID: 287524
Board Certified Specialty: No
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Male
NPI: 1457664518
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
BIFFL, SUSAN
Provider ID: 287453
Board Certified Specialty: No
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Female
NPI: 1366589640
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
ALGRA, JEFFREY
Provider ID: 287524
Board Certified Specialty: No
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Male
NPI: 1457664518
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
LEE, HAewON
Provider ID: 256226
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 657-8200
After Hours Phone: (858) 657-8200
Provider Gender: Female
NPI: 1447661657
Provider English Spoken: Y
Provider Language(s) Spoken: Korean
Cultural Competency: N
Hospital Affiliation: UCSD Medical Ctr, UCSD La Jolla
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
RICHARDSON, HENRY
D3. 專業提供者目錄

Provider ID: 295276
Board Certified Specialty: No
3434 MIDWAY DR STE 2001
SAN DIEGO, CA 92110
Phone: (619) 325-1161
Fax: (619) 325-1717
After Hours Phone: (619) 325-1161
Provider Gender: Male
NPI: 1407052459
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICAL MEDICINE / REHABILITATION
RYAN, KYLIE
Provider ID: 287520
Board Certified Specialty: No
7910 FROST ST STE 195
SAN DIEGO, CA 92123
Phone: (858) 966-8974
After Hours Phone: (858) 966-8974
Provider Gender: Male
NPI: 1447645742
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
AINSWORTH, DELISSA
Provider ID: 243367
Board Certified Specialty: No
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1750734893
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, UCSD MEDICAL CTR, UCSD LA 2119
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<td>ARMEEN, GARY</td>
<td>247035</td>
<td>No</td>
<td>200 W ARBOR DR SAN DIEGO, CA 92103</td>
<td>(800) 926-8273</td>
<td>(800) 926-8273</td>
<td>Male</td>
<td>1760774863</td>
<td>Y</td>
<td>N</td>
<td>UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</td>
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<td>BERGEN, SOPHEA</td>
<td>295518</td>
<td>No</td>
<td>3434 MIDWAY DR STE 308</td>
<td>(619) 265-7922</td>
<td>(619) 265-7912</td>
<td>Female</td>
<td>1558300665</td>
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<td>ALVARADO HOSPITAL LLC, PALOMAR MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL</td>
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<td>200 W ARBOR DR SAN DIEGO, CA 92103</td>
<td>(888) 539-8781</td>
<td>(800) 923-8273</td>
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<td>1235653148</td>
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<td>3434 MIDWAY DR STE 2001</td>
<td>(619) 325-1161</td>
<td>(619) 325-1161</td>
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D3. Professional Providers Directory

Website: N/A

PHYSICIANS ASSISTANT
BOYD, LISA
Provider ID: 217649
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1871859421
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
CASTILLO, PATRICIA
Provider ID: 257530
Board Certified Specialty: No
3544 30TH ST
SAN DIEGO, CA 92104
Phone: (619) 515-2424
After Hours Phone: (619) 515-2424
Provider Gender: Female
NPI: 1376550657
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
BRUECKNER, TAMMIE
Provider ID: 255558
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1407212376
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
DOUGHERTY, CLARA
Provider ID: 301589
Board Certified Specialty: No
3444 KEARNY VILLA RD
STE 201
SAN DIEGO, CA 92123
Phone: (858) 430-1101
Fax: (858) 429-7931
After Hours Phone: (858) 430-1101
Provider Gender: Female
NPI: 1609987619
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL

Website: N/A

MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
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<td>4060 4TH AVE STE 310</td>
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<td>SAN DIEGO, CA 92103</td>
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<tr>
<td>Phone: (619) 297-4707</td>
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| **GUTH, CARA** |
| Provider ID: 299111 |
| Board Certified Specialty: No |
| 9333 GENESEE AVE STE 350 |
| SAN DIEGO, CA 92121   |
| Phone: (858) 455-6460  |
| Fax: (858) 455-5362    |
| After Hours Phone: (858) 455-6460 |
| Provider Gender: Female |
| NPI: 1992177182       |

<p>| <strong>DOUGHERTY, CLARA</strong> |
| Provider ID: 301591  |
| Board Certified Specialty: No |
| 11770 BERNARDO PLAZA CT STE 270 |
| SAN DIEGO, CA 92128   |
| Phone: (858) 485-0554  |
| Fax: (858) 429-7933    |
| After Hours Phone: (858) 485-0554 |
| Provider Gender: Female |
| NPI: 1609987619       |</p>
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<td>4168 FRONT ST</td>
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Your PCP's provider group may have its own network mental health service providers. Please refer to the list below. You can contact these providers directly. Please note, certain services may require the mental health service provider to obtain Blue Shield prior authorization before it can be covered.

To access a list of mental health service providers online, please visit blueshieldca.com/fad.
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<td>Kiviat, Annette</td>
<td>(858) 966-4003</td>
<td>(858) 560-6798</td>
<td>(858) 966-4003</td>
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<td>Lambert, Gage</td>
<td>(619) 265-7912</td>
<td>(619) 265-7922</td>
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<td>Lindemann, Christina</td>
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<td>◇ Website: N/A</td>
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<tr>
<td>NAKAMITSU, ABIGAIL</td>
<td>268666</td>
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<td>3030 CHILDRENS WAY FL 3</td>
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<td>MERRILL, COREY</td>
<td>258040</td>
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<td>200 W ARBOR DR</td>
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<tr>
<td>PELIO, DARREN</td>
<td>293441</td>
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<td>200 W ARBOR DR</td>
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**D3. 專業提供者目錄**

SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (858) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1194373514
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT

MARTIN, HALEY
Provider ID: 305026
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1093440836
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NAKAMITSU, ABIGAIL
Provider ID: 268666
Board Certified Specialty: No
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-6789
Fax: (858) 966-8519
After Hours Phone: (858) 966-6789
Provider Gender: Female
NPI: 1932459179
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

MERRILL, COREY
Provider ID: 258040
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1386032308
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PELIO, DARREN
Provider ID: 293441
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8275
Fax: (888) 539-8783

2125
D3. 專業提供者目錄

- **PHUNG, AIVI**
  - Provider ID: 293247
  - Board Certified Specialty: No
  - 6973 LINDA VISTA RD
  - SAN DIEGO, CA 92111
  - Phone: (858) 279-0925
  - Fax: (858) 633-4680
  - Provider Gender: Female
  - NPI: 1639528110
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Vietnamese
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

- **PHUNG, AIVI**
  - Provider ID: 293246
  - Board Certified Specialty: No
  - 7011 LINDA VISTA RD
  - SAN DIEGO, CA 92111
  - Phone: (858) 810-8700
  - Fax: (858) 633-4680
  - Provider Gender: Female
  - NPI: 1639528110
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Vietnamese
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

- **PELIO, DARREN**
  - Provider ID: 293444
  - Board Certified Specialty: No
  - 3900 5TH AVE STE 110
  - SAN DIEGO, CA 92103
  - Phone: (800) 926-8278
  - Fax: (888) 539-8786
  - Provider Gender: Male
  - NPI: 1386791028
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

- **PERREAULT, MARK**
  - Provider ID: 283586
  - Board Certified Specialty: No
  - 4520 EXECUTIVE DR
  - SAN DIEGO, CA 92121
  - Phone: (800) 926-8273
  - Fax: (858) 633-4680
  - Provider Gender: Male
  - NPI: 1356749451
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
  - 8:00AM-5:00PM
  - Website: N/A

- **PERREAULT, MARK**
  - Provider ID: 283585
  - Board Certified Specialty: No
  - 4520 EXECUTIVE DR
  - SAN DIEGO, CA 92121
  - Phone: (800) 926-8273
  - Fax: (858) 633-4680
  - Provider Gender: Male
  - NPI: 1356749451
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Hours: M-F
  - 8:00AM-5:00PM
  - Website: N/A

- **PHUNG, AIVI**
  - Provider ID: 293247
  - Board Certified Specialty: No
  - 6973 LINDA VISTA RD
  - SAN DIEGO, CA 92111
  - Phone: (858) 279-0925
  - Fax: (858) 633-4680
  - Provider Gender: Female
  - NPI: 1639528110
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Vietnamese
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

- **PHUNG, AIVI**
  - Provider ID: 293246
  - Board Certified Specialty: No
  - 7011 LINDA VISTA RD
  - SAN DIEGO, CA 92111
  - Phone: (858) 810-8700
  - Fax: (858) 633-4680
  - Provider Gender: Female
  - NPI: 1639528110
  - Provider English Spoken: Y
  - Provider Language(s): Spoken: Vietnamese
  - Cultural Competency: N
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

PHYSICIANS ASSISTANT
PRIEST, VIVIAN
Provider ID: 272430
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1225581754
Provider English Spoken: Y
Provider Language(s): Vietnamese
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 20\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
ROBERTS, AUDREY
Provider ID: 253253
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-7777
After Hours Phone: (619) 543-7777
Provider Gender: Female
NPI: 1265960256
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
SCHMITT, EVA
Provider ID: 264176
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1174715106
Provider English Spoken: Y
Provider Language(s): Spoken: German
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
SCHROEDER, JENNIFER
Provider ID: 256639
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (858) 453-1469
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780851253
Provider English Spoken: Y
Provider Language(s): Spoken: German
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. Professional Providers Directory

Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
SCHROEDER, JENNIFER
Provider ID: 256640
Board Certified Specialty: No
4520 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780851253
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
SCHULZ, STEFAN
Provider ID: 243419
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1316102163
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
SHAUL, SHERA
Provider ID: 247974
Board Certified Specialty: No
4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1336659507
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
SPEH, BRIAN
Provider ID: 305009
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1124593926
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
STALLINGS, ANDREA
Provider ID: 255913
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (619) 543-7496
After Hours Phone: (619) 543-7496
Provider Gender: Female
NPI: 1972595478
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
TESFAI, HELEN
Provider ID: 287372
D3. 專業提供者目錄

Board Certified Specialty: No
⽅ 4168 FRONT ST
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942724042
/AIDS Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
WAHLIN, TAMARA
Provider ID: 299599
Board Certified Specialty: No
⽅ 8899 UNIVERSITY CENTER LN
SAN DIEGO, CA 92122
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1083823322
/AIDS Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
WAHLIN, TAMARA
Provider ID: 305285
Board Certified Specialty: No
⽅ 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
📞 Phone: (858) 750-2983
Fax: (858) 750-2984
📞 After Hours Phone: (858) 750-2983
Provider Gender: Female
NPI: 1821271685
/AIDS Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18–999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
WEBB, SHANNON
Provider ID: 305285
Board Certified Specialty: No
⽅ 6605 NANCY RIDGE DR
SAN DIEGO, CA 92121
📞 Phone: (858) 750-2983
Fax: (858) 750-2984
📞 After Hours Phone: (858) 750-2983
Provider Gender: Female
NPI: 1821271685
/AIDS Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18–999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Website: N/A

PHYSICIANS ASSISTANT
WEBR, JACQUELINE
Provider ID: 278203
Board Certified Specialty: No
⽅ 2129
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<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
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<td>278200</td>
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<td>ROMERO, CAMILA</td>
<td>293289</td>
<td>No</td>
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<td>WRIGHT, DEREK</td>
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Remarks:
- Provider Gender: Female
- NPI: 1932494499
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A
D3. Professional Providers Directory

Accessibility: CONTACT PROVIDER
Website: N/A

PREVENTATIVE MEDICINE
GENERAL
ROMERO, CAMILA
Provider ID: 293290
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1508912130
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
ABERCROMBIE, SHERI
Provider ID: 293400
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1932292422
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
BANKS, SARAH
Provider ID: 203174
Board Certified Specialty: No
4510 EXECUTIVE DR STE 325
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
D3. 專業提供者目錄

Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
BANKS, SARAH
Provider ID: 203173
Board Certified Specialty: No
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
BASS, GURGIANA
Provider ID: 290752
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8787
Fax: (858) 987-5825
After Hours Phone: (858) 810-8787
Provider Gender: Male
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
CLEMENT, LUIS
Provider ID: 290745
Board Certified Specialty: No
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619) 234-2158
Provider Gender: Male
NPI: 1235364712
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
CHESHER, NICHOLAS
Provider ID: 273811
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯繫該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D3. 專業提供者目錄

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

PSYCHOLOGIST
DEL AGUILA, FABIOLA
Provider ID: 290302
Board Certified Specialty: No
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Provider Gender: Female
NPI: 1720283211
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
FIRESTONE, MICHELLE
Provider ID: 290954
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1114687803
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
DIOKNO, RHODA
Provider ID: 290080
Board Certified Specialty: No
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619) 234-2158
Provider Gender: Female
NPI: 1629109483

PSYCHOLOGIST
FIRESTONE, MICHELLE
Provider ID: 290780
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (619) 961-1497
Fax: (858) 633-4680
After Hours Phone: (619) 961-1497
Provider Gender: Female
NPI: 1902939630
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
GIAMONA, KRISTEN
Provider ID: 294171
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1114687803
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Your PCP’s doctor group may have their own network mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, certain services may require the mental health service provider to obtain Blue Shield's prior authorization, then the service can be covered.

To obtain the mental health service provider list online, please visit blueshieldca.com/fad.
Fax: (858) 633-4680  
After Hours Phone: (858) 279-0925  
Provider Gender: Female  
NPI: 1376824383  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**PSYCHOLOGIST**  
**GIAMONA, KRISTEN**  
Provider ID: 290801  
Board Certified Specialty: No  
7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 810-8787  
Fax: (858) 987-5825  
After Hours Phone: (858) 810-8787  
Provider Gender: Female  
NPI: 1376824383  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**PSYCHOLOGIST**  
**KLUEMPER, NICOLE**  
Provider ID: 296237  
Board Certified Specialty: No  
6030 VILLAGE WAY  
SAN DIEGO, CA 92130  
Phone: (800) 926-8372  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8372  
Provider Gender: Female  
NPI: 1790915759  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**PSYCHOLOGIST**  
**KLUEMPER, NICOLE**  
Provider ID: 290792  
Board Certified Specialty: No  
7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 810-8700  
Fax: (858) 279-0377  
After Hours Phone: (858) 810-8700  
Provider Gender: Female  
NPI: 1902125818  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**PSYCHOLOGIST**  
**LABIB, MICHAEL**  
Provider ID: 301617  
Board Certified Specialty: No  
6011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (619) 662-4100  
Fax: (619) 785-3384  
After Hours Phone: (619) 662-4100  
Provider Gender: Male  
NPI: 1609055797  
Provider English Spoken: Y  
Provider Language(s): Arabic  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

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<td>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</td>
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<td>Website: N/A</td>
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</tr>
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PSYCHOLOGIST
LEBENSOHN CHIALVO, FLORENCIA
Provider ID: 245225
Board Certified Specialty: No
7910 FROST ST STE 350
SAN DIEGO, CA 92123
Phone: (858) 496-4800
After Hours Phone: (858) 496-4800
Provider Gender: Female
NPI: 1134788730
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
LINKE, SARAH
Provider ID: 273638
Board Certified Specialty: No
9909 MIRA MESA BLVD STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1487026415
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
MAGINOT-CHESHER, TAMARA
Provider ID: 273223
Board Certified Specialty: No
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (858) 534-8019
Fax: (858) 534-6727
D3. 專業提供者目錄

- After Hours Phone: (858) 534-8019
  Provider Gender: Female
  NPI: 1043441165
  Provider English Spoken: Y
  Cultural Competency: N
  Hospital Affiliation: UCSD
  MEDICAL CTR, Rady
  CHILDRENS HOSPITAL SAN DIEGO
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  Website: N/A

PSYCHOLOGIST
MCCULLUM, TIFFANY
Provider ID: 290689
Board Certified Specialty: No
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 205-1949
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1528306206
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
NING, GRACE
Provider ID: 296219
Board Certified Specialty: No
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Provider Gender: Female
NPI: 1598911315
Provider English Spoken: Y
Provider Language(s): Spoken: Chinese, Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
NING, GRACE
Provider ID: 290742
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1598911315
Provider English Spoken: Y
Provider Language(s): Spoken: Chinese, Mandarin
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
NORMAN, MARC
Provider ID: 276869
Board Certified Specialty: No
2136
D3. 專業提供者目錄

350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1922169101
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
ORFF, HENRY
Provider ID: 273009
Board Certified Specialty: No
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (844) 757-5337
After Hours Phone: (844) 757-5337
Provider Gender: Male
NPI: 1144685215
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
NORMAN, MARC
Provider ID: 272916
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (619) 543-2827
After Hours Phone: (619) 543-2827
Provider Gender: Male
NPI: 1922169101
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
ORTIZ, MARIA
Provider ID: 290721
Board Certified Specialty: No
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1497980775
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
PATTERSON-HYATT, KIMBERLY
Provider ID: 290730
Board Certified Specialty: No
4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1780997742
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
PRINCE, RENEE
Provider ID: 303603
Board Certified Specialty: No
D3. 專業提供者目錄

PSYCHOLOGIST
SCHELLINGER, KRISTON
Provider ID: 213750
Board Certified Specialty: No
9333 GENEESEE AVE STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD La Jolla John Sally Thornton, UCSD Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
RADOJEVIC, NATASHA
Provider ID: 290690
Board Certified Specialty: No
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 279-0377
After Hours Phone: (858) 810-8700
Provider Gender: Female
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD La Jolla John Sally Thornton, UCSD Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
SCHELLINGER, KRISTON
Provider ID: 213751
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 246-1979
After Hours Phone: (858) 246-1979
Provider Gender: Female
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Children's Hospital San Diego, UCSD La Jolla John Sally Thornton, UCSD Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
### D3. 專業提供者目錄

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<th>Provider Name</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Practice Address</th>
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<th>After Hours Phone</th>
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<tr>
<td>TARLE, STEPHANIE</td>
<td>303115</td>
<td>No</td>
<td>6655 ALVARADO RD SAN DIEGO, CA 92120</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>Female</td>
<td>1659920403</td>
<td>Y</td>
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<td>TO, TUAN</td>
<td>290285</td>
<td>No</td>
<td>6973 LINDA VISTA RD SAN DIEGO, CA 92111</td>
<td>(858) 279-0925</td>
<td>(858) 633-4680</td>
<td>(858) 279-0925</td>
<td>Male</td>
<td>1255696183</td>
<td>Y</td>
<td>N</td>
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<td>0\999</td>
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<td>CONTACT PROVIDER</td>
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<tr>
<td>VANI, HENRY</td>
<td>290589</td>
<td>No</td>
<td>4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105</td>
<td>(619) 280-2058</td>
<td>(858) 633-4682</td>
<td>(619) 280-2058</td>
<td>Male</td>
<td>1396072500</td>
<td>Y</td>
<td>N</td>
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<td>TO, TUAN</td>
<td>290284</td>
<td>No</td>
<td>7011 LINDA VISTA RD SAN DIEGO, CA 92111</td>
<td>(858) 810-8700</td>
<td>(858) 633-4680</td>
<td>(858) 810-8700</td>
<td>Male</td>
<td>1255696183</td>
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<td>N</td>
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280-2058
Provider Gender: Female
NPI: 1215288238
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**PULMONARY DISEASES**

**BAILEY, JACOB**
Provider ID: 299924
Board Certified Specialty: No
- 4520 EXECUTIVE DR
  SAN DIEGO, CA 92121
- Phone: (800) 926-8273
  Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598150039
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**JOSHUA, JISHA**
Provider ID: 238062
Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
- Phone: (800) 926-8273
  After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1023436417
- Provider English Spoken: Y
- Provider Language(s) Spoken: Hindi, Malayalam
- Cultural Competency: N
- Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**LE, HUAN**
Provider ID: 300636
Board Certified Specialty: No
- 5507 EL CAJON BLVD STE C
  SAN DIEGO, CA 92115
- Phone: (619) 582-1448
  Fax: (619) 582-1081

---

**D3. 專業提供者目錄**

280-2058
Provider Gender: Female
NPI: 1215288238
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**PULMONARY DISEASES**

**BAILEY, JACOB**
Provider ID: 299924
Board Certified Specialty: No
- 4520 EXECUTIVE DR
  SAN DIEGO, CA 92121
- Phone: (800) 926-8273
  Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598150039
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A

**PULMONARY DISEASES**

**BAILEY, JACOB**
Provider ID: 299923
Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
- Phone: (800) 926-8273
  After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1598150039
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Website: N/A
D3. 專業提供者目錄

- **LE, HUAN**
  - Provider ID: 27358
  - Board Certified Specialty: No
  - 5507 EL CAJON BLVD STE C
    - SAN DIEGO, CA 92115
  - Phone: (619) 582-1448
  - Fax: (619) 582-1081
  - After Hours Phone: (619) 582-1448
  - Provider Gender: Male
  - NPI: 1780797381
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

- **PEARCE, ALEX**
  - Provider ID: 300055
  - Board Certified Specialty: No
  - 200 W ARBOR DR
    - SAN DIEGO, CA 92103
  - Phone: (800) 926-8273
  - Fax: (888) 539-8781
  - After Hours Phone: (800) 926-8273
  - Provider Gender: Female
  - NPI: 1265896856
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

- **McGUIRE, WILLIAM**
  - Provider ID: 299986
  - Board Certified Specialty: No
  - 200 W ARBOR DR
    - SAN DIEGO, CA 92103
  - Phone: (800) 926-8273
  - Fax: (888) 539-8781
  - After Hours Phone: (800) 926-8273
  - Provider Gender: Male
  - NPI: 1841684081
  - Provider English Spoken: Y
  - Cultural Competency: N
  - Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR
  - Medi-Cal Open Panel: Yes
  - Min/Max Age: 0\999
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Website: N/A

- **CARMONA, RUBEN**
  - Provider ID: 303100
  - Board Certified Specialty: No
  - 7901 FROST ST
    - SAN DIEGO, CA 92123
  - Phone: (858) 939-5010
  - Fax: (619) 740-8499
  - After Hours Phone: (858) 939-5010
  - Provider Gender: Male
D3. 專業提供者目錄

NPI: 1275929242
- Provider English Spoken: Y
- Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

RADIATION ONCOLOGY
COLEMAN, LORI
Provider ID: 221091
Board Certified Specialty: No
- 3075 HEALTH CENTER DR
  SAN DIEGO, CA 92123
- Phone: (858) 939-5010
- Fax: (858) 939-5021
- After Hours Phone: (858) 939-5010
Provider Gender: Female
NPI: 1053348920
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, PALOMAR MEDICAL CENTER, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

RADIATION ONCOLOGY
HATTANGADI GLUTH, JONA
Provider ID: 262270
Board Certified Specialty: No
- 16918 DOVE CANYON RD STE 103
  SAN DIEGO, CA 92127
- Phone: (858) 649-5100
- Fax: (858) 649-5099
- After Hours Phone: (858) 649-5100
Provider Gender: Female
NPI: 1467625491
- Provider English Spoken: Y
- Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TH 8:00AM-5:00PM
  F 8:00AM-8:00PM
- Website: N/A

RADIATION ONCOLOGY
HOOPES, DAVID
Provider ID: 262206
Board Certified Specialty: No
- 16918 DOVE CANYON RD STE 103
  SAN DIEGO, CA 92127
- Phone: (858) 649-5100
- Fax: (858) 649-5099
- After Hours Phone: (858) 649-5100
Provider Gender: Male
NPI: 1962520080
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish
- Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TH 8:00AM-5:00PM
  F 8:00AM-8:00PM
- Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:30AM-5:00PM
 Website: N/A

RADIATION ONCOLOGY
HOOPES, DAVID
Provider ID: 269725
Board Certified Specialty: No
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Phone: (559) 447-4949
Fax: (559) 447-4925
After Hours Phone: (559) 447-4949
Provider Gender: Male
NPI: 1962520080
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Website: N/A

RADIATION ONCOLOGY
MURPHY, JAMES
Provider ID: 262401
Board Certified Specialty: No
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Phone: (559) 447-4949
Fax: (559) 447-4925
After Hours Phone: (559) 447-4949
Provider Gender: Male
NPI: 1730382631
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR

RADIATION ONCOLOGY
VOLPP, PAUL
Provider ID: 221105
Board Certified Specialty: No
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 939-5010
Fax: (858) 939-5021
After Hours Phone: (858) 939-5010
Provider Gender: Male
NPI: 1225186232
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, GROSSMONT HOSPITAL,
PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

RADIATION ONCOLOGY
WEINSTEIN, GEOFFREY
Provider ID: 220039
Board Certified Specialty: No
3075 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 939-5010
Fax: (858) 939-5021
After Hours Phone: (858) 939-5010
Provider Gender: Male
NPI: 1841233947
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Cultural Competency: N
 Hospital Affiliation: GROSSMONT HOSPITAL,
SHARP MEMORIAL HOSPITAL,
SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 19\100
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A
D3. 專業提供者目錄

RADIOLOGY DIAGNOSTIC
BERMAN, ZACHARY
Provider ID: 304163
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033521190
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY
THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
BRANCH, CODY
Provider ID: 283675
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851770622
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
BERMAN, ZACHARY
Provider ID: 269318
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033521190
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
BRANCH, CODY
Provider ID: 304199
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
📞 After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851770622
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
CARSWELL, AIMEE
Provider ID: 304194
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
📞 Phone: (858) 554-1212
Fax: (858) 795-1195
📞 After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1619156635
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
RADIOLOGY DIAGNOSTIC
CARSWELL, AIMEE
Provider ID: 303054
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1619156635
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
CHENG, KAREN
Provider ID: 283226
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427430511
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
CARSWELL, AIMEE
Provider ID: 303055
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 554-1212
Fax: (858) 795-1195
After Hours Phone: (858) 554-1212
Provider Gender: Female
NPI: 1619156635
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
CHENG, KAREN
Provider ID: 283228
Board Certified Specialty: No
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427430511
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
CHENG, KAREN
Provider ID: 304207
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1427430511
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
EISENHOWER MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
CHEWNING, RUSH
Provider ID: 301914
Board Certified Specialty: No
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
Phone: (858) 966-8863
Fax: (858) 966-8863
After Hours Phone: (858) 966-8863
Provider Gender: Male
NPI: 1083872212
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
FAZELI, SOUDABEH
Provider ID: 304171
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1639553613
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
FORCIER, NANCY
Provider ID: 286954
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497721724
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Scripps Green Hospital, Scripps Memorial Hospital, Providence Mission Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL):
D3. 專業提供者目錄

N

Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
FORCIER, NANCY
Provider ID: 286956
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1497721724

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
FOWLER, KATHRYN
Provider ID: 201291
Board Certified Specialty: No
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1255457941

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS GREEN HOSPITAL, SCRIPPS GREEN HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
D3. PROVIDER

- PROVIDER
  - Hours: M-F
    - 8:00AM-5:00PM
  - Website: N/A

- RADIOLOGY DIAGNOSTIC
  - GRISOM, MURRAY
    - Provider ID: 271569
    - Board Certified Specialty: No
    - 330 LEWIS ST STE 202
      - SAN DIEGO, CA 92103
    - Phone: (800) 926-8273
    - Fax: (888) 539-8781
    - After Hours Phone: (800) 926-8273
    - Provider Gender: Male
    - NPI: 1992120026
    - Provider English Spoken: Y
    - Provider Language(s)
      - Spoken: Khmer, Spanish
    - Cultural Competency: N
    - Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
    - JOHN SALLY THORNTON,
      - Stanford Health Care,
      - STANFORD HEALTH CARE TRI-VALLEY
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0-999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
      - Hours: M-F
        - 8:00AM-5:00PM
    - Website: N/A

- RADIOLOGY DIAGNOSTIC
  - GORKY, LAURA
    - Provider ID: 241853
    - Board Certified Specialty: No
    - 200 W ARBOR DR
      - SAN DIEGO, CA 92103
    - Phone: (800) 926-8273
    - Fax: (888) 539-8781
    - After Hours Phone: (800) 926-8273
    - Provider Gender: Female
    - NPI: 1598967812
    - Provider English Spoken: Y
    - Provider Language(s)
      - Spoken: Khmer, Spanish
    - Cultural Competency: N
    - Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
    - JOHN SALLY THORNTON
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0-999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
      - Hours: M-F
        - 8:00AM-5:00PM
    - Website: N/A

- RADIOLOGY DIAGNOSTIC
  - HANNSUN, GEMMY
    - Provider ID: 282791
    - Board Certified Specialty: No
    - 330 LEWIS ST STE 202
      - SAN DIEGO, CA 92103
    - Phone: (800) 926-8273
    - Fax: (888) 539-8781
    - After Hours Phone: (800) 926-8273
    - Provider Gender: Male
    - NPI: 1992120026
    - Provider English Spoken: Y
    - Provider Language(s)
      - Spoken: Khmer, Spanish
    - Cultural Competency: N
    - Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
    - JOHN SALLY THORNTON
    - Medi-Cal Open Panel: Yes
    - Min/Max Age: 0-999
    - American Sign Language (ASL): N
    - Accessibility: CONTACT PROVIDER
      - Hours: M-F
        - 8:00AM-5:00PM
    - Website: N/A

- RADIOLOGY DIAGNOSTIC
  - JAFFRAY, PAUL
    - Provider ID: 299957
    - Board Certified Specialty: No
    - 200 W ARBOR DR
      - SAN DIEGO, CA 92103
    - Phone: (800) 926-8273
D3. 專業提供者目錄

Fax: (888) 539-8781
✈️ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1275700999
_provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Los Angeles General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
_website: N/A

RADIOLOGY DIAGNOSTIC
JAFFRAY, PAUL
Provider ID: 299958
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
✈️ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1275700999
_provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Los Angeles General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
_website: N/A

RADIOLOGY DIAGNOSTIC
JAFFRAY, PAUL
Provider ID: 304165
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
✈️ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1275700999
_provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Los Angeles General Medical Center
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
_website: N/A

RADIOLOGY DIAGNOSTIC
JAZBEH, SAMMER
Provider ID: 271126
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
✈️ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1770825457
_provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
Min/Max Age: 0\999
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
_website: N/A

RADIOLOGY DIAGNOSTIC
JAZBEH, SAMMER
Provider ID: 271127
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
✈️ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1770825457
_provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
Min/Max Age: 0\999
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
_website: N/A
D3. 專業提供者目錄

**RADIOLOGY DIAGNOSTIC**

**KONDILI, DHIMITER**  
Provider ID: 283145  
Board Certified Specialty: No  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Availability: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**MARKS, ROBERT**  
Provider ID: 300064  
Board Certified Specialty: No  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Availability: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**EISENHOWER MEDICAL CTR**

**MARKS, ROBERT**  
Provider ID: 300064  
Board Certified Specialty: No  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Availability: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A
D3. 專業提供者目錄

RADIOLOGY DIAGNOSTIC
RITCHIE, DAVID
Provider ID: 300031
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
⏰ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407201916
❯ Provider English Spoken: Y
❯ Cultural Competency: N
❯ Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
❯ Accessibility: CONTACT PROVIDER
❯ Website: N/A

RADIOLOGY DIAGNOSTIC
RITCHIE, DAVID
Provider ID: 300032
Board Certified Specialty: No
📍 330 LEWIS ST
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
⏰ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1407201916
❯ Provider English Spoken: Y
❯ Cultural Competency: N
❯ Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
❯ Accessibility: CONTACT PROVIDER
❯ Website: N/A

RADIOLOGY DIAGNOSTIC
SADAT, SAYED
Provider ID: 299968
Board Certified Specialty: No
📍 200 W ARBOR DR
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
⏰ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1679000806
❯ Provider English Spoken: Y
❯ Cultural Competency: N
❯ Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
❯ Accessibility: CONTACT PROVIDER
❯ Website: N/A

RADIOLOGY DIAGNOSTIC
SADAT, SAYED
Provider ID: 299969
Board Certified Specialty: No
📍 330 LEWIS ST
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
⏰ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1679000806
❯ Provider English Spoken: Y
❯ Cultural Competency: N
❯ Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
❯ Accessibility: CONTACT PROVIDER
❯ Website: N/A

RADIOLOGY DIAGNOSTIC
SADAT, SAYED
Provider ID: 304202
Board Certified Specialty: No
📍 6655 ALVARADO RD
SAN DIEGO, CA 92120
📞 Phone: (800) 926-8273
Fax: (888) 539-8781
⏰ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1679000806
❯ Provider English Spoken: Y
❯ Cultural Competency: N
❯ Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
❯ Accessibility: CONTACT PROVIDER
❯ Website: N/A

RADIOLOGY DIAGNOSTIC
SCHULTZ, HEATHER
Provider ID: 240344
Board Certified Specialty: No
📍 330 LEWIS ST STE 202
SAN DIEGO, CA 92103
📞 Phone: (800) 926-8273
⏰ After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1871910810
❯ Provider English Spoken: Y
❯ Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
D3. 專業提供者目錄

Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
SCHULTZ, HEATHER
Provider ID: 240342
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1871910810
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
SEARLEMAN, ADAM
Provider ID: 299949
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1134570641
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
SEARLEMAN, ADAM
Provider ID: 299949
Board Certified Specialty: No
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1134570641
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
SLATER, JERRY
Provider ID: 283312
Board Certified Specialty: No
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1851746382
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0 \ 999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

JOHN SALLY THORNTON,
LOMA LINDA UNIVERSITY
MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
SPENGLER, NATHAN
Provider ID: 303049
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1992919666
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
UNIVERSITY OF CALIFORNIA IRVINE MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
STRAKA, CHRISTOPHER
Provider ID: 276875
Board Certified Specialty: No
16918 DOVE CANYON RD
STE 103
SAN DIEGO, CA 92127
Phone: (858) 649-5100
Fax: (858) 649-5099
After Hours Phone: (858) 649-5100
Provider Gender: Male
NPI: 1801281399
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 17\120
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
SWEET, JASON
Provider ID: 305028
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1326197393
Provider English Spoken: Y
Cultural Competency: N

RADIOLOGY DIAGNOSTIC
TADDONIO, MICHAEL
Provider ID: 240408
Board Certified Specialty: No
4168 FRONT ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
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<td>0\999</td>
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<td>M-F 8:00AM-5:00PM</td>
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The information includes the provider's name, provider ID, board certification status, hospital affiliation, Medi-Cal open panel status, age range, American Sign Language (ASL) proficiency, accessibility, and hours of operation. Website information is also provided for some providers.
8:00AM-5:00PM  
Website: N/A

RADIOLOGY DIAGNOSTIC  
TADROS, ANTHONY  
Provider ID: 304150  
Board Certified Specialty: No  
6655 ALVARADO RD  
SAN DIEGO, CA 92120  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1306112057  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

RADIOLOGY DIAGNOSTIC  
THOMPSON, COLE  
Provider ID: 299988  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1700315264  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

RADIOLOGY DIAGNOSTIC  
THOMPSON, COLE  
Provider ID: 300035  
Board Certified Specialty: No  
330 LEWIS ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1285165183  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

RADIOLOGY DIAGNOSTIC  
UNSDORFER, KYLE  
Provider ID: 300034  
Board Certified Specialty: No  
330 LEWIS ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1700315264  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  

RADIOLOGY DIAGNOSTIC  
UNSDORFER, KYLE  
Provider ID: 300035  
Board Certified Specialty: No  
330 LEWIS ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1285165183  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A
RADIOLOGY DIAGNOSTIC
VAHDOT, NOUSHIN
Provider ID: 300071
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285165183
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
VAHDOT, NOUSHIN
Provider ID: 300070
Board Certified Specialty: No
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1396700852
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
VAKILIAN, SIAVOSH
Provider ID: 283207
Board Certified Specialty: No
5395 RUFFIN RD STE 103
SAN DIEGO, CA 92123
Phone: (858) 505-4100
Fax: (858) 429-7939
After Hours Phone: (858) 505-4100
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
YORK, VINCENT
Provider ID: 283517
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1790146611
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes

RADIOLOGY DIAGNOSTIC
VAHDOT, NOUSHIN
Provider ID: 300071
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285165183
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

RADIOLOGY DIAGNOSTIC
VAKILIAN, SIAVOSH
Provider ID: 283205
Board Certified Specialty: No
3306 5TH AVE
SAN DIEGO, CA 92103
Phone: (619) 230-0400
Fax: (858) 429-7938
After Hours Phone: (619) 230-0400
Provider Gender: Male
NPI: 1427456151
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
YORK, VINCENT
Provider ID: 283519
Board Certified Specialty: No
330 LEWIS ST STE 202
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982120861
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
AGUERO, PETER
Provider ID: 258298
Board Certified Specialty: No
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1982120861
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
BARTZ, BRYAN
Provider ID: 273381
Board Certified Specialty: No
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1669818993
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
BARTZ, BRYAN
Provider ID: 273380
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
D3. 專業提供者目錄

NPI: 1669818993
☑ Provider English Spoken: Y
☐ Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
☑ Accessibility: CONTACT PROVIDER
☐ Hours: M-F
8:00AM-5:00PM
☐ Website: N/A

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL
Provider ID: 258304
Board Certified Specialty: No
☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
☒ Phone: (800) 926-8273
☐ Fax: (888) 539-8781
☐ After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780018416
☑ Provider English Spoken: Y
☐ Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
☐ Hours: M-F
8:00AM-5:00PM
☐ Website: N/A

REGISTERED PHYSICAL THERAPIST

BERGERON, PATRICK
Provider ID: 206534
Board Certified Specialty: No
☐ 16950 VIA TAZON
SAN DIEGO, CA 92127
☒ Phone: (800) 926-8273
☒ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285061390
☑ Provider English Spoken: Y
☐ Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
☐ Hours: M-F
8:00AM-5:00PM
☐ Website: N/A

REGISTERED PHYSICAL THERAPIST

BUNOSKY, ABIGAIL
Provider ID: 246022
Board Certified Specialty: No
☒ 200 W ARBOR DR
SAN DIEGO, CA 92103
☒ Phone: (800) 926-8273
☐ Fax: (888) 539-8781
☐ After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1780018416
☑ Provider English Spoken: Y
☐ Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
☐ Hours: M-F
8:00AM-5:00PM
☐ Website: N/A

REGISTERED PHYSICAL THERAPIST

CORTEZ, AARON
Provider ID: 279194
Board Certified Specialty: No
☒ 16950 VIA TAZON
SAN DIEGO, CA 92127
☒ Phone: (800) 926-8273
☐ Fax: (888) 539-8781
☒ After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1639693187
☑ Provider English Spoken: Y
☐ Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA
THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
☐ Hours: M-F
8:00AM-5:00PM
☐ Website: N/A

REGISTERED PHYSICAL THERAPIST

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<td>COSTELLO, MARK</td>
<td>295634</td>
<td>No</td>
<td>7510 CLAIREMONT MESA BLVD STE 103 SAN DIEGO, CA 92111</td>
<td>(858) 277-2277</td>
<td>(408) 945-4018</td>
<td>(858) 277-2277</td>
<td>Male</td>
<td>1710193602</td>
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<td>16950 VIA TAZON SAN DIEGO, CA 92127</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
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<td>1316426356</td>
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<td>(858) 543-3333</td>
<td>(858) 657-1809</td>
<td>(858) 543-3333</td>
<td>Male</td>
<td>1891237756</td>
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<td>FARRAR, COURTNEY</td>
<td>295259</td>
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<td>3434 MIDWAY DR STE 2001 SAN DIEGO, CA 92110</td>
<td>(619) 325-1161</td>
<td>(619) 325-1717</td>
<td>(619) 325-1161</td>
<td>Male</td>
<td>1124577952</td>
<td>Y</td>
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<td>(619) 325-1161</td>
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<td>Male</td>
<td>1124577952</td>
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<td>(619) 325-1161</td>
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<td>1124577952</td>
<td>Y</td>
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<td>JOLLA JOHN SALLY</td>
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</table>

Registered Physical Therapist

**DANG, KAYLEE**

Provider ID: 279261

Board Certified Specialty: No

Address: 16950 VIA TAZON SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1316426356

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

**DANG, ERIC**

Provider ID: 258363

Board Certified Specialty: No

Address: 8929 UNIVERSITY CENTER LN STE 200 SAN DIEGO, CA 92122

Phone: (858) 543-3333

Fax: (858) 657-1809

After Hours Phone: (858) 543-3333

Provider Gender: Male

NPI: 1891237756

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**FARRAR, COURTNEY**

Provider ID: 295259

Board Certified Specialty: No

Address: 3434 MIDWAY DR STE 2001 SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619) 325-1161

Provider Gender: Male

NPI: 1124577952

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**FARRAR, COURTNEY**

Provider ID: 303843

Board Certified Specialty: No

Address: 3434 MIDWAY DR STE 2001 SAN DIEGO, CA 92110

Phone: (619) 325-1161

Fax: (619) 325-1717

After Hours Phone: (619) 325-1161

Provider Gender: Male

NPI: 1124577952

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 13\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A
D3. 專業提供者目錄

**REGISTERED PHYSICAL THERAPIST**

**JOHNSON, KENNADY**  
Provider ID: 305041  
Board Certified Specialty: No  
16950 VIA TAZON  
SAN DIEGO, CA 92127  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1730834417  
Provider English Spoken: Y  
Provider Language(s) Spoken: English  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**REGISTERED PHYSICAL THERAPIST**  

**MC ELROY, CARTER**  
Provider ID: 206522  
Board Certified Specialty: No  
8929 UNIVERSITY CENTER LN STE 200  
SAN DIEGO, CA 92122  
Phone: (855) 543-0333  
Fax: (858) 657-6873  
After Hours Phone: (855) 543-0333  
Provider Gender: Male  
NPI: 1114472230  
Provider English Spoken: Y  
Provider Language(s) Spoken: English  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**REGISTERED PHYSICAL THERAPIST**  

**NGUYEN, HARRY**  
Provider ID: 271871  
Board Certified Specialty: No  
16950 VIA TAZON  
SAN DIEGO, CA 92127  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1629558499  
Provider English Spoken: Y  
Provider Language(s) Spoken: English  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**REGISTERED PHYSICAL THERAPIST**  

**NUTHALL, KAITLIN**  
Provider ID: 202326  
Board Certified Specialty: No  
8929 UNIVERSITY CENTER LN STE 200  
SAN DIEGO, CA 92122  
Phone: (858) 249-0832  
Fax: (858) 657-1809  
After Hours Phone: (858) 249-0832  
Provider Gender: Female  
NPI: 1992210090  
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST
RICKERTS, MATTHEW
Provider ID: 287652
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1063882579
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST
RUDD, CHRISTOPHER
Provider ID: 207560
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1831539337
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A

REGISTERED PHYSICAL THERAPIST
SKINNER, NICOLE
Provider ID: 206547
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1386964997
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
 8:00AM-5:00PM
 Website: N/A
REGISTERED PHYSICAL THERAPIST
VASQUEZ, BENJAMIN
Provider ID: 302870
Board Certified Specialty: No
4910 DIRECTORS PL
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1568938413
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

WILLIAMS, STACY
Provider ID: 259683
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1689962169
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
WALKER, JULIE
Provider ID: 258489
Board Certified Specialty: No
8929 UNIVERSITY CENTER LN STE 200
SAN DIEGO, CA 92122
Phone: (855) 543-0333
Fax: (858) 535-6422
After Hours Phone: (855) 543-0333
Provider Gender: Female
NPI: 1720489503
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

AROCHO-SALGADO, MIRELIS
Provider ID: 296929
Board Certified Specialty: No
11440 W BERNARDO CT STE 300
SAN DIEGO, CA 92127
Phone: (877) 757-8353
Fax: (818) 357-2505
After Hours Phone: (877) 757-8353
Provider Gender: Female
NPI: 1063660165
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
D3. 專業提供者目錄

| Provider Name | Address                | Phone  | Fax       | After Hours Phone | Provider ID | Min/Max Age | American Sign Language (ASL): | Board Certified Specialty: | Medi-Cal Open Panel: | Provider Gender | NPI:         | Provider English Spoken: | Cultural Competency: | Language(s) Spoken: | Cultural Competency: | Medi-Cal Open Panel: | Provider Gender | NPI:         | Provider English Spoken: | Cultural Competency: | Language(s) Spoken:|
|----------------|------------------------|--------|-----------|-------------------|-------------|-------------|------------------------------|---------------------------|----------------------|-----------------|----------------|----------------|-------------------|-------------------|-------------------|------------------|---------------------|-----------------|----------------|-------------------|-------------------|------------------|
| SPEECH PATHOLOGIST | AROCHO-SALGADO, MIRELIS | 7510 CLAIREMONT MESA BLVD STE 103 | SAN DIEGO, CA 92111 | (877) 757-8353 | 296932 | 18\999 | N | Accessibility: CONTACT PROVIDER | Website: N/A | N | Provider ID: 296932 | No | Provider English Spoken: | Y | | Cultural Competency: | N | Medi-Cal Open Panel: Yes | Min/Max Age: 18\999 | American Sign Language (ASL): | N | Accessibility: CONTACT PROVIDER | Website: N/A |
| SPEECH PATHOLOGIST | CALDERON MORALES, ASTRID | 9655 GRANITE RIDGE DR STE 200 | SAN DIEGO, CA 92123 | (877) 757-8353 | 305581 | 18\999 | N | Accessibility: CONTACT PROVIDER | Website: N/A | N | Provider ID: 305581 | No | Provider English Spoken: | Y | Provider Language(s) | Spoken: Armenian, Spanish | Cultural Competency: | N | Medi-Cal Open Panel: Yes | Min/Max Age: 18\999 | American Sign Language (ASL): | N | Accessibility: CONTACT PROVIDER | Hours: M-F 7:00AM-7:00PM | Website: N/A |
| SPEECH PATHOLOGIST | CALDERON MORALES, ASTRID | 11440 W BERNARDO CT STE 300 | SAN DIEGO, CA 92127 | (877) 757-8353 | 305579 | 18\999 | N | Accessibility: CONTACT PROVIDER | Hours: M-F 7:00AM-7:00PM | Website: N/A | Provider Gender: Female | NPI: 1619501186 | Provider English Spoken: | Y | Provider Language(s) | Spoken: Armenian, Spanish | Cultural Competency: | N | Medi-Cal Open Panel: Yes | Min/Max Age: 18\999 | American Sign Language (ASL): | N | Provider English Spoken: | Cultural Competency: | Language(s) Spoken: | Cultural Competency: | Medi-Cal Open Panel: Yes | Provider Gender | NPI: | Provider English Spoken: | Cultural Competency: | Language(s) Spoken: | Cultural Competency: | Medi-Cal Open Panel: Yes | Provider Gender | NPI: | Provider English Spoken: | Cultural Competency: | Language(s) Spoken: | Cultural Competency: | Medi-Cal Open Panel: Yes | Provider Gender | NPI: | Provider English Spoken: | Cultural Competency: | Language(s) Spoken: | Cultural Competency: | Medi-Cal Open Panel: Yes |

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如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

- **Accessibility:** CONTACT PROVIDER  
  - Hours: M-F 7:00AM-7:00PM  
  - Website: N/A

**SPEECH PATHOLOGIST**  
**CLARK, MELISSA**  
Provider ID: 296920  
Board Certified Specialty: No  
11440 W BERNARDO CT STE 300  
SAN DIEGO, CA 92127  
Phone: (877) 757-8353  
Fax: (818) 357-2505  
After Hours Phone: (877) 757-8353  
Provider Gender: Female  
NPI: 1760546428  
- Provider English Spoken: Yes  
- Provider Language(s)  
  - Spoken: Arabic, Armenian, Farsi, Spanish  
- Cultural Competency: N  
- Medi-Cal Open Panel: Yes  
- Min/Max Age: 18-999  
- American Sign Language (ASL): N  
- Accessibility: CONTACT PROVIDER  
- Hours: SU 7:00AM-7:00PM  
  - M-F 7:00AM-7:00PM  
  - Website: N/A

- **SPEECH PATHOLOGIST**  
  **CLARK, MELISSA**  
  Provider ID: 296921  
  Board Certified Specialty: No  
  9655 GRANITE RIDGE DR STE 200  
  SAN DIEGO, CA 92123  
  Phone: (877) 757-8353  
  Fax: (818) 357-2505  
  After Hours Phone: (877) 757-8353  
  Provider Gender: Female  
  NPI: 1760546428  
  - Provider English Spoken: Yes  
  - Provider Language(s)  
    - Spoken: Arabic, Armenian, Farsi, Spanish  
  - Cultural Competency: N  
  - Medi-Cal Open Panel: Yes  
  - Min/Max Age: 18-999  
  - American Sign Language (ASL): N  
  - Accessibility: CONTACT PROVIDER  
  - Hours: SU 7:00AM-9:00PM  
    - M-F 7:00AM-9:00PM  
  - Website: N/A

- **SPEECH PATHOLOGIST**  
  **MADERA RIVERA, PAULA**  
  Provider ID: 296575  
  Board Certified Specialty: No  
  7510 CLAIREMONT MESA BLVD STE 103  
  SAN DIEGO, CA 92111  
  Phone: (858) 277-2277  
  Fax: (818) 357-2505  
  After Hours Phone: (858) 277-2277  
  Provider Gender: Female  
  NPI: 1205443769  
  - Provider English Spoken: Yes  
  - Provider Language(s)  
    - Spoken: Arabic, Armenian, Farsi, Spanish  
  - Cultural Competency: N  
  - Medi-Cal Open Panel: Yes  
  - Min/Max Age: 18-999  
  - American Sign Language (ASL): N  
  - Accessibility: CONTACT PROVIDER  
  - Hours: M-F 7:00AM-7:00PM  
  - Website: N/A

- **SPEECH PATHOLOGIST**  
  **MADERA RIVERA, PAULA**  
  Provider ID: 296576  
  Board Certified Specialty: No  
  7510 CLAIREMONT MESA BLVD STE 102  
  SAN DIEGO, CA 92111  
  Phone: (877) 757-8353  
  Fax: (818) 357-2505  
  After Hours Phone: (877) 757-8353  
  Provider Gender: Female  
  NPI: 1670546428  
  - Provider English Spoken: Yes  
  - Provider Language(s)  
    - Spoken: Arabic, Armenian, Farsi, Spanish  
  - Cultural Competency: N  
  - Medi-Cal Open Panel: Yes  
  - Min/Max Age: 18-999  
  - American Sign Language (ASL): N  
  - Accessibility: CONTACT PROVIDER  
  - Hours: SU 7:00AM-7:00PM  
    - M-F 7:00AM-7:00PM  
  - Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
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<th>Name</th>
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<td>296586</td>
<td>O'DORAN, KAYLA</td>
<td>Female</td>
<td>1275021438</td>
<td>Speech Pathologist</td>
<td>Arabic, Armenian, Farsi, Spanish</td>
<td>Yes</td>
<td>18-999</td>
<td>(877) 757-8353</td>
<td>(818) 357-2505</td>
<td>(877) 757-8353</td>
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<td>296578</td>
<td>MADERA RIVERA, PAULA</td>
<td>Female</td>
<td>1205443769</td>
<td>Speech Pathologist</td>
<td>Arabic, Armenian, Farsi, Spanish</td>
<td>Yes</td>
<td>Min/Max Age: 18-999</td>
<td>Phone: (877) 757-8353</td>
<td>Fax: (818) 357-2505</td>
<td>After Hours Phone: (877) 757-8353</td>
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<td>296585</td>
<td>O'DORAN, KAYLA</td>
<td>Female</td>
<td>1275021438</td>
<td>Speech Pathologist</td>
<td>Arabic, Armenian, Farsi, Spanish</td>
<td>Yes</td>
<td>Min/Max Age: 18-999</td>
<td>Phone: (877) 757-8353</td>
<td>Fax: (818) 357-2505</td>
<td>After Hours Phone: (877) 757-8353</td>
<td>CONTACT PROVIDER</td>
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<td>296586</td>
<td>O'DORAN, KAYLA</td>
<td>Female</td>
<td>1275021438</td>
<td>Speech Pathologist</td>
<td>Arabic, Armenian, Farsi, Spanish</td>
<td>Yes</td>
<td>Min/Max Age: 18-999</td>
<td>Phone: (877) 757-8353</td>
<td>Fax: (818) 357-2505</td>
<td>After Hours Phone: (877) 757-8353</td>
<td>CONTACT PROVIDER</td>
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**Provider English Spoken:** Y  
**Provider Language(s):** Arabic, Armenian, Farsi, Spanish  
**Cultural Competency:** N  
**Medi-Cal Open Panel:** Yes  
**Min/Max Age:** 18-999  
**American Sign Language (ASL):** N  
**Accessibility:** CONTACT PROVIDER  
**Hours:** M-F 7:00AM-7:00PM  
**Website:** N/A
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<th>Name</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Provider Gender</th>
<th>NPI</th>
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<th>Medi-Cal Open Panel</th>
<th>Min/Max Age</th>
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<tbody>
<tr>
<td>SCHIEDERMAYER, BENJAMIN</td>
<td>288937</td>
<td>No</td>
<td>8899 UNIVERSITY CENTER LN</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>Male</td>
<td>1164979837</td>
<td>Y</td>
<td>N</td>
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<td>0\999</td>
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<td>M-F 8:00AM-5:00PM</td>
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<td>MEDICAL CTR, UCSD LA JOLLA</td>
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<tr>
<td>JOHN SALLY THORNTON</td>
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D3. Professional Providers Directory

**SURGERY COLON SURGERY**

**LOPEZ, NICOLE**

Provider ID: 286366  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (619) 543-6886  
Fax: (619) 543-6886  
Provider Gender: Female  
NPI: 1518163005  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

**SURGERY COLON SURGERY**

**PARRY, LISA**

Provider ID: 286341  
Board Certified Specialty: No  
4303 LA JOLLA VILLAGE DR STE 2110  
SAN DIEGO, CA 92122  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1235369067  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

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4303 LA JOLLA VILLAGE DR STE 2110  
SAN DIEGO, CA 92122  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1043558653  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. Professional Providers Directory

Min/Max Age: 0–999
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**SURGERY COLON SURGERY**
**RAMAMOORTHY, SONIA**
Provider ID: 286370
Board Certified Specialty: No
4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122
Phone: (800) 926-8273
Fax: (888) 529-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1801812656
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**SURGERY GENERAL**
**AL-NOURI, OMAR**
Provider ID: 211903
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 822-6100
After Hours Phone: (858) 822-6100
Provider Gender: Female
NPI: 1861759383
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: MEDICAL CTR AT UCSF, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-4:30PM
Website: N/A

**SURGERY GENERAL**
**ARMANI, AVA**
Provider ID: 282141
Board Certified Specialty: Yes
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (858) 822-6100
After Hours Phone: (858) 822-6100
Provider Gender: Female
NPI: 1831493501
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-4:30PM
Website: N/A

**SURGERY GENERAL**
**BARNES, RYAN**
Provider ID: 299904
Board Certified Specialty: No
7910 FROST ST STE 250
SAN DIEGO, CA 92123
Phone: (858) 565-0104
Fax: (858) 565-0194
After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1831493501
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, PALOMAR HEALTH
Medi-Cal Open Panel: Yes
Min/Max Age: 0–999
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-4:30PM
Website: N/A
D3. 專業提供者目錄

BARNES, RYAN
Provider ID: 129062
Board Certified Specialty: No
7910 FROST ST STE 250
SAN DIEGO, CA 92123
Phone: (858) 565-0104
Fax: (858) 565-0194
After Hours Phone: (858) 565-0104
Provider Gender: Male
NPI: 1831493501
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CORONADO HOSP AND HEALTHCARE CTR, KERN MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 9:00AM-5:00PM
F 9:00AM-4:00PM
Website: N/A

SURGERY GENERAL
BERUMEN, JENNIFER
Provider ID: 260052
Board Certified Specialty: No
8001 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 966-5811
Fax: (858) 966-8035
After Hours Phone: (858) 966-5811
Provider Gender: Female
NPI: 1558566372
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RACY CHILDREN'S HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY GENERAL
BRODERICK, RYAN
Provider ID: 286342
Board Certified Specialty: No
4303 LA JOLLA VILLAGE 2169

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<td>BRODERICK, RYAN</td>
<td>247073</td>
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American Sign Language (ASL):
N
 Accessibility: CONTACT PROVIDER
\[\text{Hours: M-F} \quad 8:00AM-5:00PM\]
Website: N/A

**SURGERY GENERAL**

**CASILLAS BERUMEN, SERGIO**
Provider ID: 304609
Board Certified Specialty: No
6402 EL CAJON BLVD STE 100
SAN DIEGO, CA 92115
\[\text{Phone: (619) 582-4490}\]
\[\text{Fax: (619) 501-9702}\]
\[\text{After Hours Phone: (619) 582-4490}\]
Provider Gender: Male
NPI: 1437470762
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: PARADISE VALLEY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\(\text{\textendash}999\)

**HORGAN, SANTIAGO**
Provider ID: 286379
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
\[\text{Phone: (619) 471-0700}\]
\[\text{After Hours Phone: (619) 471-0700}\]
Provider Gender: Male
NPI: 1932297231
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
John Sally Thornton
Medi-Cal Open Panel: Yes
D3. 專業提供者目錄

| Min/Max Age: | 0\999 |
| American Sign Language (ASL): | N |
| Accessibility: | CONTACT PROVIDER |
| Hours: | M-F 8:00AM-5:00PM |
| Website: | N/A |

**SURGERY GENERAL**

**HORGAN, SANTIAGO**

Provider ID: 286367

Board Certified Specialty: No

4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1932297231

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**SURGERY GENERAL**

**JACOBSEN, GARTH**

Provider ID: 201729

Board Certified Specialty: No

4520 EXECUTIVE DR STE 111
SAN DIEGO, CA 92121

Phone: (858) 657-8860

After Hours Phone: (858) 657-8860

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**SURGERY GENERAL**

**IGNACIO, ROMEO**

Provider ID: 217053

Board Certified Specialty: No

8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123

Phone: (858) 966-7711

After Hours Phone: (858) 966-7711

Provider Gender: Male

NPI: 1538147145

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**SURGERY GENERAL**

**JACOBSEN, GARTH**

Provider ID: 286355

Board Certified Specialty: No

4303 LA JOLLA VILLAGE DR STE 2110
SAN DIEGO, CA 92122

Phone: (800) 926-8273
Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1265649966

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-5:00PM

Website: N/A

**SURGERY GENERAL**

**JACOBSEN, GARTH**

Provider ID: 286356

Board Certified Specialty: No

200 W ARBOR DR
SAN DIEGO, CA 92103
### D3. 專業提供者目錄

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<th>Name</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
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<tr>
<td>John Sally Thornton</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
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<td>Male</td>
<td>1265649966</td>
<td>Y</td>
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<td>Mueller, George</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
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<td>Kosoy, Daniel</td>
<td>(858) 499-1900</td>
<td>(858) 637-4801</td>
<td>(858) 499-1900</td>
<td>Male</td>
<td>1770627259</td>
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<td>Mueller, George</td>
<td>(858) 565-0104</td>
<td>(858) 565-0194</td>
<td>(858) 565-0104</td>
<td>Male</td>
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<td>Pollack, Larry</td>
<td>(858) 565-0104</td>
<td>(858) 565-0194</td>
<td>(858) 565-0104</td>
<td>Male</td>
<td>1104998400</td>
<td>Y</td>
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D3. 專業提供者目錄

MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-TH 9:00AM-5:00PM
 F 9:00AM-4:00PM
 Website: N/A

SURGERY GENERAL
SANDLER, BRYAN
Provider ID: 286383
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1043410186
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SANTORELLI, JARRETT
Provider ID: 272303
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033529201
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL
SANDLER, BRYAN
Provider ID: 286357
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1043410186
 Provider English Spoken: Y
 Cultural Competency: N
 Hospital Affiliation: UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL
AL-NOURI, OMAR
Provider ID: 275349
Board Certified Specialty: No
4510 EXECUTIVE DR STE 215
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1770742264
 Provider English Spoken: Y
 Provider Language(s) Spoken: Arabic
 Cultural Competency: N
 Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
 Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

SURGERY GENERAL
D3. 專業提供者目錄

**VASCULAR**
**BARLEBEN, ANDREW**
Provider ID: 275372
Board Certified Specialty: No
4510 EXECUTIVE DR STE 215
SAN DIEGO, CA 92121
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1497936900
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

**SURGERY NEUROLOGICAL**
**BELVERUD, SHAWN**
Provider ID: 202333
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1073817268
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**SURGERY HAND**
**CAGE, DORI NEILL**
Provider ID: 296731
Board Certified Specialty: No
8008 FROST ST STE 403
SAN DIEGO, CA 92123
Phone: (858) 715-9200
Fax: (858) 715-9202
After Hours Phone: (858) 715-9200
Provider Gender: Female
NPI: 1871592253
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, SCRIPPS MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

**SURGERY NEUROLOGICAL**
**BEN-HAIM, SHARONA**
Provider ID: 304129
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
D3. Professional Providers Directory

After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1942469663
Provider English Spoken: Y
Provider Language(s)
Spoken: Hebrew, Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY NEUROLOGICAL
MARSHALL, LAWRENCE
Provider ID: 244150
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1750306171
Provider English Spoken: Y
Provider Language(s)
Spoken: German, Spanish
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, CHILDRENS HOSP OF LOS ANGELES
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY NEUROLOGICAL
OSORIO, JOSEPH
Provider ID: 304170
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1437416591
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

SURGERY NEUROLOGICAL
PHAM, MARTIN
Provider ID: 244158
Board Certified Specialty: No
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1609130921
Provider English Spoken: Y
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
Email: JSOUMEKH@AOL.COM

SURGERY NEUROLOGICAL
SOUMEKH, MASSOUD
Provider ID: 257468
Board Certified Specialty: Yes
8008 FROST ST STE 401
SAN DIEGO, CA 92123
Phone: (858) 560-8544
Fax: (858) 560-8546
After Hours Phone: (858) 560-8544
Provider Gender: Male
NPI: 1265495014
Provider English Spoken: Y
Hospital Affiliation: ALVARADO HOSP MED CTR, ALVARADO HOSPITAL LLC, SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
9:00AM-4:30PM
Website: N/A

SURGERY NEUROLOGICAL
TOMLIN, JEFFREY
Provider ID: 272950
Board Certified Specialty: No
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (858) 657-8540
After Hours Phone: (858) 657-8540
Provider Gender: Male
NPI: 1366530321
Provider English Spoken: Y
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
Email: JSOUMEKH@AOL.COM

SURGERY ORTHOPEDIC
ANDRY, JAMES
Provider ID: 302086
Board Certified Specialty: No
7910 FROST ST STE 340
SAN DIEGO, CA 92123
Phone: (858) 824-1703
Fax: (858) 455-6473
After Hours Phone: (858) 824-1703
Provider Gender: Male
NPI: 1679726103
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
### D3. 專業提供者目錄

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Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
9:00AM-5:00PM  
 Website: N/A |
| SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1619231537  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON | Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
9:00AM-5:00PM  
 Website: N/A |
| SURGERY ORTHOPEDIC BLAIS, MICAH  
Provider ID: 299943  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1972867562  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MEMORIAL HOSPITAL | Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A |
| SURGERY ORTHOPEDIC BUKATA, SUSAN  
Provider ID: 277948  
Board Certified Specialty: No  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1932140639  
Provider English Spoken: Y  
Cultural Competency: N  |
| SURGERY ORTHOPEDIC BUI, CHRISTOPHER  
Provider ID: 241162  
Board Certified Specialty: No  
200 W ARBOR DR |

---

Your PCP’s provider group may have its own network of mental health providers. Please refer to the list below. You can directly contact these providers. Please note, certain services may require the mental health provider to obtain Blue Shield’s prior authorization before the service is covered.

To access the mental health provider list online, please visit blueshieldca.com/fad.
D3. 專業提供者目錄

SURGERY ORTHOPEDIC
BUKATA, SUSAN
Provider ID: 304181
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1932140639
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
CHENG, YU TSUN
Provider ID: 301903
Board Certified Specialty: No
3030 CHILDREN'S WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Male
NPI: 1992982854
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego, Southwest
Healthcare Inland Valley Hospital, Southwest
Healthcare Rancho Springs Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
CHIARAPPA, FRANK
Provider ID: 304174
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932536828
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
CHOI, JIHOON
Provider ID: 284788
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1285097741
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
CHIARAPPA, FRANK
Provider ID: 304174
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1932536828
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical Ctr
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

THORNTON, UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
CIDAMBI, EMILY
Provider ID: 296446
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Female
NPI: 1659634699
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
CIDAMBI, EMILY
Provider ID: 246466
Board Certified Specialty: No
3030 CHILDRENS WAY FL 3
SAN DIEGO, CA 92123
Phone: (858) 966-6789
Fax: (858) 966-6706
After Hours Phone: (858) 966-6789
Provider Gender: Female
NPI: 1659634699
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

SURGERY ORTHOPEDIC
EDMONDS, ERIC
Provider ID: 205495
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1013048412
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY ORTHOPEDIC
FLINT, JAMES
Provider ID: 304177
Board Certified Specialty: No
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1629239140
Provider English Spoken: Y
| Name: JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR | Provider ID: 284794 | Board Certified Specialty: No |
| Phone: (800) 926-8273 | Fax: (888) 539-8781 | After Hours Phone: (800) 926-8273 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 | American Sign Language (ASL): N |
| Accessibility: CONTACT PROVIDER | Website: N/A |

**SURGERY ORTHOPEDIC**

| FLINT, JAMES | Provider ID: 203178 | Board Certified Specialty: No |
| Phone: (858) 657-8200 | After Hours Phone: (858) 657-8200 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1629239140 |
| Provider Language(s) Spoken: German, Spanish |

| GOEB, YANNICK | Provider ID: 284794 | Board Certified Specialty: No |
| 200 W ARBOR DR SAN DIEGO, CA 92103 | Phone: (800) 926-8273 |
| Fax: (888) 539-8781 | After Hours Phone: (800) 926-8273 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1730542747 |
| Provider English Spoken: Y |

| KUSNEZOV, NICHOLAS | Provider ID: 303196 | Board Certified Specialty: No |
| 7910 FROST ST STE 340 SAN DIEGO, CA 92123 | Phone: (858) 824-1703 |
| Fax: (858) 455-6473 | After Hours Phone: (858) 824-1703 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1396185161 |
| Provider Language(s) Spoken: German, Spanish |

| JACKSON, MADELEINE | Provider ID: 301818 | Board Certified Specialty: No |
| 3020 CHILDRENS WAY SAN DIEGO, CA 92123 | Phone: (858) 966-8800 |
| After Hours Phone: (858) 966-8800 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Female | NPI: 1386140085 |

| KUSNEZOV, NICHOLAS | Provider ID: 303196 | Board Certified Specialty: No |
| 7910 FROST ST STE 340 SAN DIEGO, CA 92123 | Phone: (858) 824-1703 |
| Fax: (858) 455-6473 | After Hours Phone: (858) 824-1703 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1396185161 |
| Provider Language(s) Spoken: German, Spanish |

| JACKSON, MADELEINE | Provider ID: 301818 | Board Certified Specialty: No |
| 3020 CHILDRENS WAY SAN DIEGO, CA 92123 | Phone: (858) 966-8800 |
| After Hours Phone: (858) 966-8800 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Female | NPI: 1386140085 |
| Provider Language(s) Spoken: German, Spanish |

**SURGERY ORTHOPEDIC**

| FLINT, JAMES | Provider ID: 203178 | Board Certified Specialty: No |
| Phone: (858) 657-8200 | After Hours Phone: (858) 657-8200 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1629239140 |
| Provider Language(s) Spoken: German, Spanish |

| GOEB, YANNICK | Provider ID: 284794 | Board Certified Specialty: No |
| 200 W ARBOR DR SAN DIEGO, CA 92103 | Phone: (800) 926-8273 |
| Fax: (888) 539-8781 | After Hours Phone: (800) 926-8273 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1730542747 |
| Provider English Spoken: Y |

| JACKSON, MADELEINE | Provider ID: 301818 | Board Certified Specialty: No |
| 3020 CHILDRENS WAY SAN DIEGO, CA 92123 | Phone: (858) 966-8800 |
| After Hours Phone: (858) 966-8800 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Female | NPI: 1386140085 |
| Provider English Spoken: Y |

| KUSNEZOV, NICHOLAS | Provider ID: 303196 | Board Certified Specialty: No |
| 7910 FROST ST STE 340 SAN DIEGO, CA 92123 | Phone: (858) 824-1703 |
| Fax: (858) 455-6473 | After Hours Phone: (858) 824-1703 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1396185161 |
| Provider Language(s) Spoken: German, Spanish |

**SURGERY ORTHOPEDIC**

| FLINT, JAMES | Provider ID: 203178 | Board Certified Specialty: No |
| Phone: (858) 657-8200 | After Hours Phone: (858) 657-8200 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1629239140 |
| Provider Language(s) Spoken: German, Spanish |

| GOEB, YANNICK | Provider ID: 284794 | Board Certified Specialty: No |
| 200 W ARBOR DR SAN DIEGO, CA 92103 | Phone: (800) 926-8273 |
| Fax: (888) 539-8781 | After Hours Phone: (800) 926-8273 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1730542747 |
| Provider English Spoken: Y |

| JACKSON, MADELEINE | Provider ID: 301818 | Board Certified Specialty: No |
| 3020 CHILDRENS WAY SAN DIEGO, CA 92123 | Phone: (858) 966-8800 |
| After Hours Phone: (858) 966-8800 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Female | NPI: 1386140085 |
| Provider English Spoken: Y |

| KUSNEZOV, NICHOLAS | Provider ID: 303196 | Board Certified Specialty: No |
| 7910 FROST ST STE 340 SAN DIEGO, CA 92123 | Phone: (858) 824-1703 |
| Fax: (858) 455-6473 | After Hours Phone: (858) 824-1703 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1396185161 |
| Provider Language(s) Spoken: German, Spanish |

**SURGERY ORTHOPEDIC**

| FLINT, JAMES | Provider ID: 203178 | Board Certified Specialty: No |
| Phone: (858) 657-8200 | After Hours Phone: (858) 657-8200 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1629239140 |
| Provider Language(s) Spoken: German, Spanish |

| GOEB, YANNICK | Provider ID: 284794 | Board Certified Specialty: No |
| 200 W ARBOR DR SAN DIEGO, CA 92103 | Phone: (800) 926-8273 |
| Fax: (888) 539-8781 | After Hours Phone: (800) 926-8273 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1730542747 |
| Provider English Spoken: Y |

| JACKSON, MADELEINE | Provider ID: 301818 | Board Certified Specialty: No |
| 3020 CHILDRENS WAY SAN DIEGO, CA 92123 | Phone: (858) 966-8800 |
| After Hours Phone: (858) 966-8800 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Female | NPI: 1386140085 |
| Provider English Spoken: Y |

| KUSNEZOV, NICHOLAS | Provider ID: 303196 | Board Certified Specialty: No |
| 7910 FROST ST STE 340 SAN DIEGO, CA 92123 | Phone: (858) 824-1703 |
| Fax: (858) 455-6473 | After Hours Phone: (858) 824-1703 |
| Medi-Cal Open Panel: Yes | Min/Max Age: 0\1999 |
| Provider Gender: Male | NPI: 1396185161 |
| Provider Language(s) Spoken: German, Spanish |
## SURGERY ORTHOPEDIC

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<tr>
<td>Provider ID: 303797</td>
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<tr>
<td>3030 CHILDRENS WAY FL 3</td>
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<tr>
<td>SAN DIEGO, CA 92123</td>
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<tr>
<td>Phone: (858) 966-6789</td>
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<td>Hospital Affiliation: Rady Children's Hospital San Diego</td>
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<td>Hours: M-F 8:00AM-5:00PM</td>
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<td>6655 ALVARADO RD</td>
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<tr>
<td>SAN DIEGO, CA 92120</td>
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<tr>
<td>Phone: (800) 926-8273</td>
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<td>After Hours Phone: (800) 926-8273</td>
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<td>Hospital Affiliation: UCSD La Jolla John Sally Thornton, UCSD Medical Ctr</td>
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<td>Website: N/A</td>
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<tr>
<td>200 W ARBOR DR</td>
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<tr>
<td>SAN DIEGO, CA 92103</td>
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<tr>
<td>Phone: (800) 926-8273</td>
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<td>After Hours Phone: (800) 926-8273</td>
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<td>Website: N/A</td>
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<tbody>
<tr>
<td>Provider ID: 304142</td>
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<td>Board Certified Specialty: No</td>
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<td>6655 ALVARADO RD</td>
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<tr>
<td>SAN DIEGO, CA 92120</td>
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<tr>
<td>Phone: (800) 926-8273</td>
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<tr>
<td>Fax: (888) 539-8781</td>
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<td>After Hours Phone: (800) 926-8273</td>
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<td>American Sign Language (ASL): N</td>
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<td>Website: N/A</td>
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D3. 專業提供者目錄

- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A
D3. 專業提供者目錄

Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Surgery Orthopedic

Upasani, Vidyadhar
Provider ID: 205914
Board Certified Specialty: No
3020 Childrens Way
San Diego, CA 92123
Phone: (858) 966-8800
After Hours Phone: (858) 966-8800
Provider Gender: Male
NPI: 1548417652
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Surgery Pediatric

Gosman, Amanda
Provider ID: 205841
Board Certified Specialty: Yes
7920 Frost St Ste 200
San Diego, CA 92123
Phone: (858) 966-5999
Fax: (858) 966-4064
After Hours Phone: (858) 966-5999
Provider Gender: Female
NPI: 1164436291
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: Rady Childrens Hospital San Diego, UCSD Medical Ctr, UCSD La Jolla John Sally Thornton
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Hours: M-F
8:00AM-5:00PM
Website: N/A

Surgery Pediatric

Bickler, Stephen
Provider ID: 270090
Board Certified Specialty: No
3030 Childrens Way Fl 1
San Diego, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1891866653
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD Medical Ctr, Rady Childrens Hospital San Diego
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

Surgery Pediatric

Keller, Benjamin
Provider ID: 285941
Board Certified Specialty: No
3020 Childrens Way
San Diego, CA 92123
Phone: (858) 966-7711
D3. 的专业提供者目录

Fax: (858) 966-7712
☎ After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1285953364
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC
KLING, KAREN
Provider ID: 205340
Board Certified Specialty: No
8110 BIRMINGHAM WAY FL 2
SAN DIEGO, CA 92123
☎ Phone: (858) 966-7711
Fax: (858) 966-7712
☎ After Hours Phone: (858) 966-7711
Provider Gender: Female
NPI: 1982775144
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC
KLING, KAREN
Provider ID: 283380
Board Certified Specialty: No
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
☎ Phone: (858) 966-7711
Fax: (858) 966-7712
☎ After Hours Phone: (858) 966-7711
Provider Gender: Female
NPI: 1982775144
 Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDREN'S HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F
8:00AM-5:00PM
 Website: N/A

SURGERY PEDIATRIC
LAZAR, DAVID
Provider ID: 283140
Board Certified Specialty: No
3030 CHILDRENS WAY FL 1
SAN DIEGO, CA 92123
☎ Phone: (858) 966-7711
Fax: (858) 966-7712
☎ After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1538365002
D3. 專業提供者目錄

- Provider English Spoken: Y
  Cultural Competency: N
  Hospital Affiliation: Rady
  Children's Hospital San Diego
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\19
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  Website: N/A

SURGERY PEDIATRIC
LAZAR, DAVID
Provider ID: 205606
Board Certified Specialty: No
8110 Birmingham Way FL 2
San Diego, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1538365002
- Provider English Spoken: Y
  Cultural Competency: N
  Hospital Affiliation: Rady
  Children's Hospital San Diego
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\19
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  Website: N/A

SURGERY PEDIATRIC
THANGARAJAH, HARIHARAN
Provider ID: 206172
Board Certified Specialty: No
8110 Birmingham Way FL 2
San Diego, CA 92123
Phone: (858) 966-7711
Fax: (858) 966-7712
After Hours Phone: (858) 966-7711
Provider Gender: Male
NPI: 1598979593
- Provider English Spoken: Y
  Cultural Competency: N
  Hospital Affiliation: Rady
  Children's Hospital San Diego
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\19
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  Website: N/A

SURGERY PLASTIC
HINCHCLIFF, KATHARINE
Provider ID: 277288
Board Certified Specialty: No
200 W Arbor Dr
San Diego, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1346674561
- Provider English Spoken: Y
  Cultural Competency: N
  Hospital Affiliation: UCSD
  Medical Ctr, UCSD La Jolla
  John Sally Thornton
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM
  Website: N/A

SURGERY PLASTIC
D3. 專業提供者目錄

HINCHCLIFF, KATHARINE  
Provider ID: 277965  
Board Certified Specialty: No  
Phone: (858) 966-5999  
Fax: (858) 966-8394  
After Hours Phone: (858) 966-5999  
Provider Gender: Female  
NPI: 1346674561  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA  
John Sally Thornton  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

SURGERY PLASTIC  
KOLB, FREDERIC  
Provider ID: 246240  
Board Certified Specialty: No  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1790341832  
Provider English Spoken: Y  
Provider Language(s) Spoken: French  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

SURGERY PLASTIC  
KOLB, FREDERIC  
Provider ID: 255575  
Board Certified Specialty: No  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1790341832  
Provider English Spoken: Y  
Provider Language(s) Spoken: French  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:00AM-5:00PM  
Website: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D3. 專業提供者目錄

.provider English Spoken: Y
.Provider Language(s) Spoken: French
.Cultural Competency: N
.Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR
.Medi-Cal Open Panel: Yes
.Min/Max Age: 0\19
.American Sign Language (ASL): N
.Accessibility: CONTACT PROVIDER
.Hours: M-F 8:00AM-5:00PM
.Website: N/A

SURGERY PLASTIC
REID, CHRISTOPHER
Provider ID: 224795
.Board Certified Specialty: No
 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Phone: (800) 926-8273
  After Hours Phone: (800) 926-8273
.Provider Gender: Male
.NPI: 1982964276
.Provider English Spoken: Y
.Cultural Competency: N
.Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
.Medi-Cal Open Panel: Yes
.Min/Max Age: 0\999
.American Sign Language (ASL): N
.Accessibility: CONTACT PROVIDER
.Hours: M-F 8:00AM-5:00PM
.Website: N/A

SURGERY PLASTIC
LEWIS, PRIYA
.Provider ID: 302132
.Board Certified Specialty: No
  7920 FROST ST STE 200
  SAN DIEGO, CA 92123
  Phone: (858) 966-5999
  Fax: (858) 966-8394
  After Hours Phone: (858) 966-5999
.Provider Gender: Female
.NPI: 1720465024
.Provider English Spoken: Y
.Cultural Competency: N
.Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
.Medi-Cal Open Panel: Yes
.Min/Max Age: 0\19
.American Sign Language (ASL): N
.Accessibility: CONTACT PROVIDER
.Hours: M-F 8:00AM-5:00PM
.Website: N/A

SURGERY PLASTIC
REID, CHRISTOPHER
.Provider ID: 255564
.Board Certified Specialty: No
  4520 EXECUTIVE DR
  SAN DIEGO, CA 92121
  Phone: (800) 926-8273
  After Hours Phone: (800) 926-8273
.Provider Gender: Male
.NPI: 1982964276
.Provider English Spoken: Y
.Cultural Competency: N
.Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
.Medi-Cal Open Panel: Yes
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.American Sign Language (ASL): N
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.Hours: M-F 8:00AM-5:00PM
.Website: N/A

SURGERY THORACIC
FOX, KENNETH
Provider ID: 257841
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8030
After Hours Phone: (858) 966-8030
Provider Gender: Male
NPI: 1235153552
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY THORACIC
GANTA, SRUJAN
Provider ID: 256383
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-5855
After Hours Phone: (858) 966-5855
Provider Gender: Male
NPI: 1265071005
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

SURGERY THORACIC
LEWIS, MICHAEL
Provider ID: 296906
Board Certified Specialty: No
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8030
Fax: (858) 966-8032
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
After Hours Phone: (858) 966-8030
Provider Gender: Male
NPI: 1780847533
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO
Medi-Cal Open Panel: Yes
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A
### UROLOGY

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### TRANSPLANT SURGERY

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2189
D3. 專業提供者目錄

NPI: 1174609127
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

UROLOGY

PATEL, DEVIN

Provider ID: 246094
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Phone: (858) 657-7876
  After Hours Phone: (858) 657-7876
- Provider Gender: Male
- NPI: 1437505559
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

UROLOGY

MONGA, MANOJ

Provider ID: 256847
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Phone: (800) 926-8273
  Fax: (888) 539-8781
  After Hours Phone: (800) 926-8273
- Provider Gender: Female
- NPI: 1174609127
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

UROLOGY

SAIDIAN, AVA

Provider ID: 284831
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Phone: (800) 926-8273
  Fax: (888) 539-8781
  After Hours Phone: (800) 926-8273
- Provider Gender: Female
- NPI: 1205281912
- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

UROLOGY

SALMASI, AMIRALI

Provider ID: 203122
- Board Certified Specialty: No
- 200 W ARBOR DR
  SAN DIEGO, CA 92103
  Phone: (800) 926-8273
  After Hours Phone: (800) 926-8273
- Provider Gender: Male
- NPI: 1609187962
- Provider English Spoken: Y
- Provider Language(s) Spoken: Farsi
- Cultural Competency: N
- Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
- JOHN SALLY THORNTON
- GROSSMONT HOSPITAL
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

Professional Provider Directory

**UROLOGY**

**SALMASI, AMIRALI**

Provider ID: 302912  
Board Certified Specialty: No  
Provider Gender: Male  
NPI: 1609187962  
Provider English Spoken: Yes  
Provider Language(s) Spoken: Farsi  
Cultural Competency: No  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\1999  
American Sign Language (ASL): No  
Accessibility: CONTACT PROVIDER  
Website: N/A

**SWORDS, KELLY**

Provider ID: 206183  
Board Certified Specialty: No  
Provider Gender: Female  
NPI: 1316101256  
Provider English Spoken: Yes  
Cultural Competency: No  
Hospital Affiliation: Rady CHILDREN'S HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): No  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**UNTERBERG, STEPHEN**

Provider ID: 295833  
Board Certified Specialty: Yes  
Provider Gender: Male  
NPI: 1215374210  
Provider English Spoken: Yes  
Cultural Competency: No  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\110  
American Sign Language (ASL): No  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**UNTERBERG, STEPHEN**

Provider ID: 295834  
Board Certified Specialty: No  
Provider Gender: Male  
NPI: 1215374210  
Provider English Spoken: Yes  
Cultural Competency: No  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\110  
American Sign Language (ASL): No  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**UNTERBERG, STEPHEN**

Provider ID: 284665  
Board Certified Specialty: No  
Provider Gender: Male  
NPI: 1215374210  
Provider English Spoken: Yes  
Cultural Competency: No  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\1999  
American Sign Language (ASL): No  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**SALMASI, AMIRALI**

Provider ID: 302912  
Board Certified Specialty: No  
Provider Gender: Male  
NPI: 1609187962  
Provider English Spoken: Yes  
Provider Language(s) Spoken: Farsi  
Cultural Competency: No  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, GROSSMONT HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\1999  
American Sign Language (ASL): No  
Accessibility: CONTACT PROVIDER  
Website: N/A
D3. 專業提供者目錄

Phone: (619) 297-4707
Fax: (858) 429-7927
After Hours Phone: (619) 297-4707
Provider Gender: Male
NPI: 1215374210
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

UROLOGY
WANG, LUKE
Provider ID: 299933
Board Certified Specialty: No
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Male
NPI: 1033630173
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED ACUPUNCTURIST
CARRA, BARBARA
Provider ID: 303128
Board Certified Specialty: No
1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1588173629
Provider English Spoken: Y
Provider Language(s)
Spoken: Italian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F

2192
D3. 專業提供者目錄

CERTIFIED ACUPUNCTURIST
GONZALEZ, ANDRES
Provider ID: 298658
Board Certified Specialty: No
1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6744
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1841857729
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:30PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
FODDA, RAMI
Provider ID: 296603
Board Certified Specialty: No
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1164660452
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-6:00PM
SA 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
BLAND, JACELIS
Provider ID: 296766
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1801522859
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-6:00PM
SA 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
FREEMAN, WANDA
Provider ID: 305751
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1659504264
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
GARCIA, REGINA
Provider ID: 297837
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1639673858
Provider English Spoken: Y
Cultural Competency: N
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D3. 專業提供者目錄

CERTIFIED NURSE PRACTITIONER
PRIETO, ALEJANDRA
Provider ID: 297888
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1699222620
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
VAHDAT, VALERIE
Provider ID: 294758
Board Certified Specialty: No
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Phone: (833) 867-4642
Fax: (360) 462-5827
After Hours Phone: (833) 867-4642
Provider Gender: Female
NPI: 1093474090
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CHIROPRACTOR
HINES, TAYTE
Provider ID: 302081
Board Certified Specialty: No
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Phone: (833) 867-4642
Fax: (360) 462-5827
After Hours Phone: (833) 867-4642
Provider Gender: Male
NPI: 1598265647
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

CHIROPRACTOR
HINES, TAYTE
Provider ID: 302080
Board Certified Specialty: No
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
FAMILY PRACTICE
NATH, DEVARSHI
Provider ID: 296592
Board Certified Specialty: No
1595 GRAND AVE STE 106
SAN MARCOS, CA 92078
Phone: (760) 736-6767
Fax: (760) 736-6767
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1275630618
Provider English Spoken: Y
Provider Language(s) Spoken: Bengali
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 2\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERNAL MEDICINE
PONIACHIK, SAMUEL
Provider ID: 299258
Board Certified Specialty: No
1595 GRAND AVE STE 100
SAN MARCOS, CA 92078
Phone: (760) 520-8200
Fax: (560) 462-2749
After Hours Phone: (760) 520-8200
Provider Gender: Male
NPI: 1467485078
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

INTERNAL MEDICINE
TOLENTINO, ARTURO
Provider ID: 298696
Board Certified Specialty: No
2085 MONTIEL RD STE 102
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1467485078
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. 專業提供者目錄

**INTERVENTIONAL CARDIOLOGY**

**DO, HULBERT**

Provider ID: 295941  
Board Certified Specialty: No  
Provider ID: 291583  
Board Certified Specialty: No  
Provider ID: 291607  
Board Certified Specialty: No

Min/Max Age: 0\17  
Min/Max Age: 0\999  
Min/Max Age: 0\999

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

Accessibility: CONTACT PROVIDER  
Accessibility: CONTACT PROVIDER  
Accessibility: CONTACT PROVIDER

Hours: M-F  
8:00AM-5:00PM  
8:00AM-5:00PM

Website: N/A  
Website: N/A  
Website: N/A

**INTERVENTIONAL CARDIOLOGY**

**SUDHAKAR, DEEPTHI**

Provider ID: 291607  
Board Certified Specialty: No  
Provider ID: 245578  
Board Certified Specialty: No

Min/Max Age: 0\17  
Min/Max Age: 0\999  
Min/Max Age: 0\999

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

Accessibility: CONTACT PROVIDER  
Accessibility: CONTACT PROVIDER  
Accessibility: CONTACT PROVIDER

Hours: M-F  
8:00AM-5:00PM  
9:00AM-5:00PM

Website: N/A  
Website: N/A  
Website: N/A
D3. 專業提供者目錄

CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

INTERVENTIONAL CARDIOLOGY

SUDHAKAR, DEEPTHI
Provider ID: 295847
Board Certified Specialty: No
955 BOARDWALK STE 100
SAN MARCOS, CA 92078
Phone: (760) 798-8855
Fax: (619) 616-2104
After Hours Phone: (760) 798-8855
Provider Gender: Female
NPI: 1811307051
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: Sharp Grossmont Hospital, SHARP CHULA VISTA MED CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

NEUROLOGY

HOSSEIN ZADEH MALEKI, ANA
Provider ID: 304998
Board Certified Specialty: No
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
Phone: (760) 281-3662
Fax: (760) 316-5268
After Hours Phone: (760) 281-3662
Provider Gender: Female
NPI: 1316471485
Provider English Spoken: Y
Provider Language(s) Spoken: Arabic, Persian
Cultural Competency: N
Hospital Affiliation: TEMECULA VALLEY HOSPITAL INC
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A
D3. 專業提供者目錄

NEUROLOGY
SORIA LOPEZ, JOSE
Provider ID: 295745
Board Certified Specialty: No
 PROVIDER
838 NORDAHL RD STE 200
SAN MARCOS, CA 92069
 Phone: (760) 281-3662
Fax: (760) 316-5268
 After Hours Phone: (760) 281-3662
 Provider Gender: Male
NPI: 1225474034
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
 JOHN SALLY THORNTON,
 SCRIPPS MERCY HOSPITAL
 CHULA VISTA, TEMECULA
 VALLEY HOSPITAL INC
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-6:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY
HINSHAW, PAUL
Provider ID: 288907
Board Certified Specialty: No
 PROVIDER
120 CRAVEN RD STE 101
SAN MARCOS, CA 92078
 Phone: (760) 740-2710
Fax: (858) 207-0003
 After Hours Phone: (760) 740-2710
 Provider Gender: Male
NPI: 1215170717
 Provider English Spoken: Y
 Provider Language(s) Spoken: Spanish
 Hospital Affiliation: PALOMAR MEDICAL CENTER
 Medi-Cal Open Panel: Yes
 Min/Max Age: 13\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OBSTETRICS / GYNECOLOGY
CABRERA, MICHELLE
Provider ID: 303025
Board Certified Specialty: No
 PROVIDER
150 VALPREDA RD
SAN MARCOS, CA 92069
 Phone: (760) 736-6767
Fax: (760) 566-1501
 After Hours Phone: (760) 736-6767
 Provider Gender: Female
NPI: 1174774723
 Provider English Spoken: Y
 Hospital Affiliation: Adventist Health and Rideout
 Medi-Cal Open Panel: Yes
 Min/Max Age: 16\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A

OPHTHALMOLOGY
GUAN, HOWARD
Provider ID: 303144
Board Certified Specialty: No
 PROVIDER
100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069
 Phone: (760) 598-0400
Fax: (760) 290-7044
 After Hours Phone: (760) 598-0400
 Provider Gender: Male
NPI: 1134427636
 Provider English Spoken: Y
 Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR,
 LOMA LINDA UNIVERSITY
 CHILDREN'S HOSPITAL,
 RIVERSIDE COUNTY REGIONAL MED CTR, TRI CITY
 MEDICAL CTR
 Medi-Cal Open Panel: Yes
 Min/Max Age: 13\999
 American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
 Hours: M-F 8:00AM-5:00PM
 Website: N/A
D3. 專業提供者目錄

Phone: (760) 598-0400
Fax: (760) 290-7044
After Hours Phone: (760) 598-0400
Provider Gender: Male
NPI: 1134427636

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR, LOMA LINDA UNIVERSITY CHILDREN'S HOSPITAL, RIVERSIDE COUNTY REGIONAL MED CTR, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\0
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

Email: PRESTERA@YAHOO.COM

OPHTHALMOLOGY
PRESTERA, TORY
Provider ID: 290590
Board Certified Specialty: Yes
100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069
Phone: (760) 598-0400
Fax: (760) 598-5270
After Hours Phone: (760) 598-0400
Provider Gender: Male
NPI: 1346224557

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRICS
LUM HO, RACHEL
Provider ID: 303150
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6797
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1215469283

Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRICS
LUM HO, RACHEL
Provider ID: 304047
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6797
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1215469283

Email: PRESTERA@YAHOO.COM

OPHTHALMOLOGY
PRESTERA, TORY
Provider ID: 204707
Board Certified Specialty: Yes
100 N RANCHO SANTA FE RD STE 126
SAN MARCOS, CA 92069
Phone: (760) 598-0400
Fax: (760) 598-5270
After Hours Phone: (760) 598-0400
Provider Gender: Male
NPI: 1346224557

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Thai
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\0
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

PEDIATRICS
LUM HO, RACHEL
Provider ID: 304047
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-6797
After Hours Phone: (760) 736-6767
Provider Gender: Female
NPI: 1215469283

Email: PRESTERA@YAHOO.COM
D3. 專業提供者目錄

- Provider English Spoken: Y
- Cultural Competency: N
- Hospital Affiliation: PALOMAR MEDICAL CENTER
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0\19
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- SA 8:00AM-5:00PM
- Website: N/A

PEDIATRICS

POSADAS, EMERITO
Provider ID: 257536
Board Certified Specialty: No
- 150 VALPREDA RD
- SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- Fax: (760) 566-1501
- After Hours Phone: (760) 736-6767
- Provider Gender: Male
- NPI: 1720093198
- Provider English Spoken: Y
- Provider Language(s) Spoken: Spanish, Tagalog
- Cultural Competency: N

PHYSICIANS ASSISTANT

CELESTINO, MISHEL
Provider ID: 302439
Board Certified Specialty: No
- 150 VALPREDA RD
- SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- Fax: (760) 736-8740
- After Hours Phone: (760) 736-6767
- Provider Gender: Female
- NPI: 1578263760
- Provider English Spoken: Y

PHYSICIANS ASSISTANT

HERNANDEZ, MIRIAM
Provider ID: 298336
Board Certified Specialty: No
- 150 VALPREDA RD
- SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- Fax: (760) 736-8740
- After Hours Phone: (760) 736-6767
- Provider Gender: Female
- NPI: 1578263760
- Provider English Spoken: Y

PHYSICIANS ASSISTANT

GRAF, HALEY
Provider ID: 301290
Board Certified Specialty: No
- 150 VALPREDA RD
- SAN MARCOS, CA 92069
- Phone: (760) 736-6767
- Fax: (760) 736-8740
- After Hours Phone: (760) 736-6767
- Provider Gender: Female
- NPI: 1598394371
- Provider English Spoken: Y

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
<table>
<thead>
<tr>
<th>Name</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Provider Gender</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Cultural Competency</th>
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<th>Min/Max Age</th>
<th>American Sign Language (ASL)</th>
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<tbody>
<tr>
<td>MATHIAS, WILLIAM</td>
<td>302570</td>
<td>No</td>
<td>150 VALPREDA RD</td>
<td>(760) 736-6767</td>
<td>(760) 566-1501</td>
<td>(760) 736-6767</td>
<td>Male</td>
<td>1285806323</td>
<td>Yes</td>
<td>N</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
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<tr>
<td>ALTAMIRANO, LEON</td>
<td>290362</td>
<td>No</td>
<td>150 VALPREDA RD</td>
<td>(760) 736-6767</td>
<td>(760) 736-8740</td>
<td>(760) 736-6767</td>
<td>Female</td>
<td>1619271517</td>
<td>Yes</td>
<td>N</td>
<td>Yes</td>
<td>0\999</td>
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<td>CONTACT PROVIDER</td>
<td>N/A</td>
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<td>CORTIZO, ROSA</td>
<td>290796</td>
<td>No</td>
<td>150 VALPREDA RD</td>
<td>(760) 736-6767</td>
<td>(760) 736-8740</td>
<td>(760) 736-6767</td>
<td>Female</td>
<td>1952316648</td>
<td>Yes</td>
<td>N</td>
<td>Yes</td>
<td>0\999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>N/A</td>
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</tbody>
</table>
PSYCHOLOGIST
FLYNN, DANIELLE
Provider ID: 290795
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 737-6767
Provider Gender: Female
NPI: 1477785137
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
IMAM, SYED
Provider ID: 298174
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1447428271
Provider English Spoken: Y
Provider Language(s)
Spoken: Hindi
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
GEORGIEV, MARY JO
Provider ID: 290793
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 737-6767
Fax: (760) 736-8740
After Hours Phone: (760) 737-6767
Provider Gender: Female
NPI: 1518996875
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PSYCHOLOGIST
SIMPSON, ERIC
Provider ID: 290803
Board Certified Specialty: No
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Provider Gender: Male
NPI: 1710110416
Provider English Spoken: Y
Provider Language(s)
Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
D3. Professional Directory

Website: N/A

**RHEUMATOLOGY**

**AL NAHLAWI, BASMA**

Provider ID: 295532  
Board Certified Specialty: No  
960 W SAN MARCOS BLVD  
STE 210  
SAN MARCOS, CA 92078  
Phone: (760) 736-8091  
Fax: (760) 736-8092  
After Hours Phone: (760) 736-8091  
Provider Gender: Female  
NPI: 1144455262  
Provider English Spoken: Y  
Provider Language(s) Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: LOMA LINDA UNIVERSITY MED CTR  
MURRIETA, PALOMAR MEDICAL CENTER, LOMA LINDA UNIVERSITY MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**SAN YSIDRO**

**CERTIFIED NURSE PRACTITIONER**

**IBARRA, MARTHA**

Provider ID: 304292  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
Fax: (619) 205-6305  
After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1114957289  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A

**RHEUMATOLOGY**

**AL NAHLAWI, BASMA**

Provider ID: 290068  
Board Certified Specialty: No  
334 VIA VERA CRUZ STE 251  
SAN MARCOS, CA 92078  
Phone: (760) 736-8091  
Fax: (760) 736-8092  
After Hours Phone: (760) 736-8091  
Provider Gender: Female  
NPI: 1144455262  
Provider English Spoken: Y  
Provider Language(s) Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A
D3. 專業提供者目錄

**FAMILY PRACTICE**

**ARRIETA, NOEMI**  
Provider ID: 297794  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
Fax: (619) 205-6341  
After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1912223496  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**FAMILY PRACTICE**

**NAVARRO, VANESSA**  
Provider ID: 297756  
Board Certified Specialty: No  
1666 PRECISION PARK LN  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
Fax: (619) 785-3384  
After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1952563421  
Provider English Spoken: Y  
Provider Language(s) Spoken: Filipino, Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA, SHARP CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:30AM-5:30PM  
Website: N/A

**FAMILY PRACTICE**

**MALEK MADANI, ARIENNE**  
Provider ID: 303333  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
Fax: (619) 205-6341  
After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1124648332  
Provider English Spoken: Y  
Provider Language(s) Spoken: Persian, Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:30AM-5:30PM  
Website: N/A

**FAMILY PRACTICE**

**ORTEGA, LUIS**  
Provider ID: 295225  
Board Certified Specialty: No  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
Fax: (619) 205-6341  
After Hours Phone: (619) 662-4100  
Provider Gender: Male
D3. 專業提供者目錄

NPI: 1558924936
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A

FAMILY PRACTICE
ORTIZ ILIZALITURRI, ANA
- Provider ID: 296008
- Board Certified Specialty: No
- 4050 BEYER BLVD
  SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- Fax: (619) 205-6305
- After Hours Phone: (619) 662-4100
- Provider Gender: Female
- NPI: 1316407026
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL,
  SCRIPPS MERCY HOSPITAL CHULA VISTA
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N

GENERAL PRACTICE
SAMI, REMAN
- Provider ID: 305484
- Board Certified Specialty: No
- 4004 BEYER BLVD
  SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- Fax: (619) 205-6305
- After Hours Phone: (619) 662-4100
- Provider Gender: Female
- NPI: 1295362242
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18-999
- American Sign Language (ASL): N

GENERAL PRACTICE
GARCIA-SANDOVAL, DAMARIS
- Provider ID: 302644
- Board Certified Specialty: No
- 4004 BEYER BLVD
  SAN YSIDRO, CA 92173
- Phone: (619) 662-4100
- Fax: (619) 662-4198
- After Hours Phone: (619) 662-4100
- Provider Gender: Female
- NPI: 1447838883
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N

After Hours Phone: (619) 662-4100
- Provider Gender: Female
- NPI: 1821550559
- Provider English Spoken: Y
- Provider Language(s): Spanish
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 0-999
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
- Website: N/A
D3. 專業提供者目錄

Website: N/A

INFECTION DISEASE
ALDOUS, JEANNETTE
Provider ID: 290421
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1073650339
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM
Website: N/A

INTERNAL MEDICINE
PROMER, KATHERINE
Provider ID: 293527
Board Certified Specialty: No
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1306280607
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM
Website: N/A

INTERNAL MEDICINE
RAMIREZ SANCHEZ, CLAUDIA
Provider ID: 296122
Board Certified Specialty: Yes
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1659720555
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-2:00PM
Website: N/A

INTERNAL MEDICINE
SY, RAMON
Provider ID: 297757
Board Certified Specialty: No
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
D3. 專業提供者目錄

Fax: (619) 785-3384

Provider Gender: Male
NPI: 1982617403

Provider English Spoken: Y
Provider Language(s) Spoken: Spanish, Tagalog
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, PARADISE VALLEY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
GOLDSTEIN, EDWARD
Provider ID: 290471
Board Certified Specialty: No
4050 BEYER BLVD SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1967
After Hours Phone: (619) 662-4100
Provider Gender: Male
NPI: 1982617494
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Hospital Affiliation: SHARP MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-8:00PM SA 8:00AM-2:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
GOMEZ, DANIELA
Provider ID: 294885
Board Certified Specialty: No
4004 BEYER BLVD STE 400 SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1255878997
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
GOMEZ, DANIELA
Provider ID: 294886
Board Certified Specialty: No
4050 BEYER BLVD SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-1967
After Hours Phone: (619) 662-4100
Provider Gender: Female
NPI: 1255878997
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:30AM-5:30PM SA 8:00AM-2:30PM
Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D3. 專業提供者目錄

<table>
<thead>
<tr>
<th>業務類型</th>
<th>名稱</th>
<th>ID</th>
<th>準則</th>
<th>医療機構</th>
<th>可接受的範圍</th>
<th>语言</th>
<th>業務範圍</th>
<th>聯絡電話</th>
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<tbody>
<tr>
<td>OPHTHALMOLOGY</td>
<td>DE SILVA, NIHAL</td>
<td>290551</td>
<td>No</td>
<td>MARINHEALTH AND MARINHEALTH MEDICAL CENTER</td>
<td>Yes</td>
<td>0\18</td>
<td>(619) 662-4100</td>
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<tr>
<td>PEDIATRICS</td>
<td>FUJI, CINDY</td>
<td>298309</td>
<td>No</td>
<td>SCRIPPS MEMORIAL HOSPITAL</td>
<td>Yes</td>
<td>0\18</td>
<td>(619) 662-4100</td>
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<tr>
<td>PSYCHOLOGIST</td>
<td>IBANEZ, BERENICE</td>
<td>290465</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td>(619) 662-4100</td>
<td></td>
</tr>
</tbody>
</table>
D3. 專業提供者目錄

- After Hours Phone: (619) 662-4100
  Provider Gender: Female
  NPI: 1740394386
  Provider English Spoken: Y
  Provider Language(s): Spanish
  Cultural Competency: N
  Hospital Affiliation: TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Website: N/A

- Website: N/A

**REGISTERED PHYSICAL THERAPIST**

**TORRES, JOANN**

Provider ID: 296045
Board Certified Specialty: No

- Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Provider Gender: Female
  NPI: 1134732522
  Provider English Spoken: Y
  Cultural Competency: N
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Website: N/A

**PSYCHOLOGIST**

**JOHNSON, JENNIFER**

Provider ID: 301296
Board Certified Specialty: No

- Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Provider Gender: Female
  NPI: 1023783248
  Provider English Spoken: Y
  Cultural Competency: N
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\64
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F 8:00AM-5:00PM

- Website: N/A

**SPEECH PATHOLOGIST**

**HILL, CARLA**

Provider ID: 295894
Board Certified Specialty: No

- Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Provider Gender: Female
  NPI: 1043950751
  Provider English Spoken: Y
  Cultural Competency: N
  Medi-Cal Open Panel: Yes
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: SU 10:00AM-4:00PM
  M-F 8:30AM-5:30PM
  SA 10:00AM-2:30PM
  Website: N/A

**PHYSICIANS ASSISTANT**

**ROSENBLATT, SHERI**

Provider ID: 295738
Board Certified Specialty: No

- Phone: (619) 662-4100
  After Hours Phone: (619) 662-4100
  Provider Gender: Female
  NPI: 1114041621
  Provider English Spoken: Y
  Cultural Competency: N
  Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL
  Medi-Cal Open Panel: Yes
  Min/Max Age: 18\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: SU 10:00AM-4:00PM
  M-F 8:30AM-5:30PM
  Website: N/A

**RADIOLOGY DIAGNOSTIC**

**MOORE, BRIAN**

Provider ID: 243961
Board Certified Specialty: No

- Phone: (619) 460-2770
  Provider Gender: Male
  NPI: 1043905751
Fax: (619) 460-2774
-country: After Hours Phone: (619) 460-2770
Provider Gender: Male
NPI: 1831144005
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- Hours: M-F 7:00AM-5:00PM
Website: N/A

REGISTERED PHYSICAL THERAPIST
BOUTELLE, DAVID
Provider ID: 248308
Board Certified Specialty: No
9830 PROSPECT AVE STE A
Santee, CA 92071
Phone: (619) 448-4860
Fax: (619) 448-1639
-country: After Hours Phone: (760) 591-7750
Provider Gender: Male
NPI: 1063461101
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM
Website: N/A

RADIOLOGY DIAGNOSTIC
VENKATESH, VIJAY
Provider ID: 269661
Board Certified Specialty: No
9640 MISSION GORGE RD STE H
Santee, CA 92071
Phone: (619) 460-2770
Fax: (619) 460-2770
-country: After Hours Phone: (619) 460-2770
Provider Gender: Male
NPI: 1689627085
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: GROSSMONT HOSPITAL
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- Hours: M 7:00AM-7:00PM
TU 7:00AM-5:00PM
W 7:00AM-7:00PM
TH 7:00AM-5:00PM
F 7:00AM-7:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
MIRACLE, ANGELYN
Provider ID: 300260
Board Certified Specialty: No
31170 TEMECULA PKWY STE 200
TEMECULA, CA 92592
Phone: (951) 699-3299
Fax: (951) 302-1313
-country: After Hours Phone: (951) 699-3299
Provider Gender: Female
NPI: 1144539842
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: No
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- Hours: M-F

CERTIFIED ACUPUNCTURIST
CRAFT, KEVIN
Provider ID: 290944
Board Certified Specialty: No
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Phone: (951) 225-6400
Fax: (360) 462-2751
-country: After Hours Phone: (951) 225-6400
Provider Gender: Male
NPI: 1659745610
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
- Hours: M-F
D3. 專業提供者目錄

8:00AM-5:00PM
Website: N/A

PHYSICIANS ASSISTANT
ANWAR, YASMIN
Provider ID: 300846
Board Certified Specialty: No
31515 RANCHO PUEBLO RD
STE 102
TEMECULA, CA 92592
Phone: (951) 225-7873
Fax: (951) 305-9117
After Hours Phone: (951) 225-7873
Provider Gender: Female
NPI: 1588602247
Provider English Spoken: Y
Provider Language(s): Persian, Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

SURGERY GENERAL
VASCULAR
HOWE, STEVEN
Provider ID: 206759
Board Certified Specialty: No
31700 TEMECULA VALLEY PARKWAY
TEMECULA, CA 92592
Phone: (951) 303-2349
Fax: (951) 303-8591
After Hours Phone: (951) 303-2349
Provider Gender: Male
NPI: 1497702740
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A

PSYCHOLOGIST
WOODWORTH, JENNIFER
Provider ID: 290633
Board Certified Specialty: No
41840 ENTERPRISE CIR N
TEMECULA, CA 92590
Phone: (951) 225-6400
Fax: (858) 633-4697
After Hours Phone: (951) 225-6400
Provider Gender: Female
NPI: 1639362494
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-5:00PM
Website: N/A

ANESTHESIOLOGY PAIN MANAGEMENT
GUPTA, ANUJ
Provider ID: 297703
Board Certified Specialty: No
2023 W VISTA WAY STE D
VISTA, CA 92083
Phone: (619) 330-8771
Fax: (619) 330-8772
After Hours Phone: (619) 330-8771
Provider Gender: Male
NPI: 1073629549
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: POMONA VALLEY HOSP MED CTR,
PARADISE VALLEY HOSPITAL,
TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
Website: N/A
Email: CAMEDBILL@AOL.COM

CARDIOVASCULAR DISEASE
DO, HULBERT
Provider ID: 290574
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000

VISTA
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1679733760
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SHARP CHULA VISTA MED CTR, Sharp Grossmont Hospital
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
AYELE, MAHOGANY
Provider ID: 257586
Board Certified Specialty: No
1000 VALE TERRACE DR VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1902120421
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH 8:00AM-5:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
AYELE, MAHOGANY
Provider ID: 257587
Board Certified Specialty: No
134 GRAPEVINE RD VISTA, CA 92083
Phone: (844) 308-5003
Fax: (760) 414-3763
After Hours Phone: (844) 308-5003
Provider Gender: Female
NPI: 1902120421
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED ACUPUNCTURIST
SONG, CAROL
Provider ID: 290550
Board Certified Specialty: No
1000 VALE TERRACE DR VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1518166685
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CERTIFIED NURSE PRACTITIONER
BERNETICH, MEGHAN
Provider ID: 304506
Board Certified Specialty: No
1000 VALE TERRACE DR VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3702
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1629354360
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A
D3. 專業提供者目錄

CERTIFIED NURSE
PRACTITIONER
BERNETICH, MEGHAN
Provider ID: 302526
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3702
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1629354360
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\1999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

CERTIFIED NURSE
PRACTITIONER
CARDINELL, ANNA
Provider ID: 291411
Board Certified Specialty: No
910 SYCAMORE AVE STE 270
VISTA, CA 92081
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1306978614
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\24
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
9:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE
PRACTITIONER
CHILAKA, SAMUEL
Provider ID: 301312
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1679140644
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE
PRACTITIONER
CHRISTY, TYLER
Provider ID: 303927
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D3. 專業提供者目錄

PROVIDER
About hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
CHRISTY, TYLER
Provider ID: 303929
Board Certified Specialty: No
105 DURIAN ST STE A
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
About hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
CHRISTY, TYLER
Provider ID: 303928
Board Certified Specialty: No
517 N HORNE ST
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1689094971
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
About hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
CHRISTY, TYLER
Provider ID: 303928
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1194027706
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
About hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HALGEDAHL, YI
Provider ID: 241907
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619246907
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): Y
Provider Language(s) Spoken: Mandarin
Accessibility: CONTACT PROVIDER
About hours: M 8:00AM-5:00PM
TU 10:30AM-7:30PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A
D3. 專業提供者目錄

American Sign Language (ASL): 1000 VALE TERRACE DR
VISTA, CA 92084
📞 Phone: (760) 631-5000
Fax: (760) 414-3892
⏰ After Hours Phone: (760) 631-5000
 PROVIDER

HARRIS, PAMELA
Provider ID: 303439
Board Certified Specialty: No
📍 1000 VALE TERRACE DR
VISTA, CA 92084
📞 Phone: (760) 631-5000
Fax: (760) 414-3892
⏰ After Hours Phone: (760) 631-5000
 PROVIDER

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

HOURS: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HARRIS, PAMELA
Provider ID: 302286
Board Certified Specialty: No
📍 134 GRAPEVINE RD
VISTA, CA 92083
📞 Phone: (760) 631-5000
Fax: (760) 414-3892
⏰ After Hours Phone: (760) 631-5000
 PROVIDER

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

HOURS: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HARRIS, PAMELA
Provider ID: 302287
Board Certified Specialty: No
📍 134 GRAPEVINE RD
VISTA, CA 92083
📞 Phone: (760) 631-5000
Fax: (760) 414-3892
⏰ After Hours Phone: (760) 631-5000
 PROVIDER

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

HOURS: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HERNANDEZ, JESSICA
Provider ID: 302297
Board Certified Specialty: No
📍 134 GRAPEVINE RD
VISTA, CA 92083
📞 Phone: (760) 631-5000
Fax: (760) 414-3892
⏰ After Hours Phone: (760) 631-5000
 PROVIDER

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

HOURS: M-F
8:00AM-5:00PM
Website: N/A

2216
D3. 專業提供者目錄

NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HERNANDEZ, JESSICA
Provider ID: 304493
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
HERNANDEZ, JESSICA
Provider ID: 302296
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013668680
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
KELLEHER, BRIDGET
Provider ID: 298085
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1245695006
Provider English Spoken: Y
D3. 專業提供者目錄

🛒 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Website: N/A

CERTIFIED NURSE PRACTITIONER  
KELLEHER, BRIDGET  
Provider ID: 298083  
Board Certified Specialty: No  
134 GRAPEVINE RD  
VISTA, CA 92083  
Phone: (760) 631-5000  
After Hours Phone: (760) 631-5000  
Provider Gender: Female  
NPI: 1245695006  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Website: N/A

CERTIFIED NURSE PRACTITIONER  
KORMANIK, PATRICIA  
Provider ID: 282072  
Board Certified Specialty: No  
910 SYCAMORE AVE STE 102  
VISTA, CA 92081  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1093895047  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 6\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Website: N/A

CERTIFIED NURSE PRACTITIONER  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Website: N/A

CERTIFIED NURSE PRACTITIONER  
MONTGOMERY, KEITH ALLEN  
Provider ID: 295288  
Board Certified Specialty: No  
134 GRAPEVINE RD  
VISTA, CA 92083  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
Provider Gender: Male  
NPI: 1790978617  
Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 6\999  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
Website: N/A

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D3. 專業提供者目錄

MONTGOMERY, KEITH ALLEN
Provider ID: 295284
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1790978617
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 6\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TU 8:00AM-5:00PM
       W 10:00AM-7:00PM
       TH-F 8:00AM-5:00PM
       SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
PRITZKER, JOELLY
Provider ID: 239773
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1619384351
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
       SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
SRILASAK, MICHELE
Provider ID: 281857
Board Certified Specialty: No
910 SYCAMORE AVE STE 102
VISTA, CA 92081
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Provider Gender: Female
NPI: 1265487326
Provider English Spoken: Y
Provider Language(s): Spanish
Cultural Competency: N
Hospital Affiliation: UCSD
MEDICAL CTR, UCSD LA JOLLA
D3. 專業提供者目錄

JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
TAYLOR, CHRISTOPHER
Provider ID: 295502
Board Certified Specialty: No
1000 VALE TERRACE DR VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1851747166
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Hours: M-F
8:00AM-2:00PM
SA 9:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
WINDHAM, SUZONNE
Provider ID: 303840
Board Certified Specialty: No
134 GRAPEVINE RD VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1679926208
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessible: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM
Website: N/A

CERTIFIED NURSE PRACTITIONER
WINDHAM, SUZONNE
Provider ID: 303721
Board Certified Specialty: No
134 GRAPEVINE RD VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
D3. 專業提供者目錄

**Provider Gender: Female**
- Provider ID: 303724
- Board Certified Specialty: No
- 105 DURIAN ST STE A
  - VISTA, CA 92083
  - Phone: (760) 631-5000
  - Fax: (760) 414-3892
- After Hours Phone: (760) 631-5000
- Provider Gender: Female
- NPI: 1679926208
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 12–999
- American Sign Language (ASL): N

**Certified Nurse Practitioner**

**WINDHAM, SUZONNE**
- Provider ID: 303726
- Board Certified Specialty: No
- 1000 VALE TERRACE DR
  - VISTA, CA 92084
  - Phone: (760) 631-5000
  - Fax: (760) 414-3892
- After Hours Phone: (760) 631-5000
- Provider Gender: Female
- NPI: 1679926208
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 12–999
- American Sign Language (ASL): N

**Certified Nurse Practitioner**

**YCASAS, EMILY**
- Provider ID: 298837
- Board Certified Specialty: No
- 1000 VALE TERRACE DR
  - VISTA, CA 92084
  - Phone: (760) 631-5000
  - Fax: (760) 414-3892
- After Hours Phone: (760) 631-5000
- Provider Gender: Female
- NPI: 1033841861
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18–999
- American Sign Language (ASL): N

**Certified Nurse Practitioner**

**GUIDI, CASEY**
- Provider ID: 300224
- Board Certified Specialty: No
- 1000 VALE TERRACE DR
  - VISTA, CA 92084
  - Phone: (760) 631-5000
  - Fax: (760) 414-3892
- After Hours Phone: (760) 631-5000
- Provider Gender: Female
- NPI: 1679926208
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 12–999
- American Sign Language (ASL): N

American Sign Language (ASL):
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM
  - SA 8:00AM-4:00PM
- Website: N/A

**Certified Nurse Practitioner**

**WINDHAM, SUZONNE**
- Provider ID: 303842
- Board Certified Specialty: No
- 1000 VALE TERRACE DR
  - VISTA, CA 92084
  - Phone: (760) 631-5000
  - Fax: (760) 414-3892
- After Hours Phone: (760) 631-5000
- Provider Gender: Female
- NPI: 1679926208
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 18–999
- American Sign Language (ASL): N

**Certified Nurse Practitioner**

**WINDHAM, SUZONNE**
- Provider ID: 303726
- Board Certified Specialty: No
- 1000 VALE TERRACE DR
  - VISTA, CA 92084
  - Phone: (760) 631-5000
  - Fax: (760) 414-3892
- After Hours Phone: (760) 631-5000
- Provider Gender: Female
- NPI: 1679926208
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 12–999
- American Sign Language (ASL): N

**Certified Nurse Practitioner**

**WINDHAM, SUZONNE**
- Provider ID: 303726
- Board Certified Specialty: No
- 1000 VALE TERRACE DR
  - VISTA, CA 92084
  - Phone: (760) 631-5000
  - Fax: (760) 414-3892
- After Hours Phone: (760) 631-5000
- Provider Gender: Female
- NPI: 1679926208
- Provider English Spoken: Y
- Cultural Competency: N
- Medi-Cal Open Panel: Yes
- Min/Max Age: 12–999
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM
  - SA 8:00AM-4:00PM
- Website: N/A

**Certified Registered Nurse Midwife**

**GUIDI, CASEY**
- Provider ID: 300224
- Board Certified Specialty: No
- 1000 VALE TERRACE DR
  - VISTA, CA 92084
  - Phone: (760) 631-5000
D3. 專業提供者目錄

Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1013349919
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

CHIROPRACTOR
CORTEZ, JAIME
Provider ID: 290483
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 414-3892
Fax: (760) 631-5000
After Hours Phone: (760) 414-3892
Provider Gender: Male
NPI: 1508195348
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
Website: N/A

CHIROPRACTOR
JU, NATHANIEL
Provider ID: 290222
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1972883882
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

FAMILY PRACTICE
HIKES, RYAN
Provider ID: 291652
Board Certified Specialty: No
2222
Phone: (760) 631-5000
Fax: (760) 414-3892
Provider Gender: Female
NPI: 1013349919
Provider English Spoken: Y
Provider Language(s)
Spoken: Chinese
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-8:00PM
Website: N/A

2222
D3. 專業提供者目錄

1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1609862358
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
MARTINEZ, LESLY
Provider ID: 298003
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1629509260
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
NGUYEN, DANIELA
Provider ID: 305346
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1891069662
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
Website: N/A

FAMILY PRACTICE
VIDAL, MONICA
Provider ID: 293354
2223
D3. 專業提供者目錄

**Board Certified Specialty:** No

**1000 VALE TERRACE DR**

VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1871791749

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

Website: N/A

**HOSPICE AND PALLIATIVE MEDICINE**

**RUBENZIK, TAMARA**

Provider ID: 282128

Board Certified Specialty: No

**910 SYCAMORE AVE STE 102**

VISTA, CA 92081

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1811200652

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0/999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

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

TU 10:30AM-7:30PM

W-F 8:00AM-5:00PM

Website: N/A

**INTERNAL MEDICINE**

**DAO, MARC**

Provider ID: 297754

Board Certified Specialty: No

**1000 VALE TERRACE DR**

VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3763

After Hours Phone: (760) 631-5000

Provider Gender: Male

NPI: 1467542175

Provider English Spoken: Y

Provider Language(s) Spoken: French, Vietnamese

Cultural Competency: N

Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, PALOMAR MEDICAL CENTER, SHARP MEMORIAL HOSPITAL,
D3. 專業提供者目錄

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EL CENTRO REGIONAL MEDICAL CENTER, PALOMAR HEALTH
Medi-Cal Open Panel: Yes Min/Max Age: 18\999 American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER Hours: M-TH 8:00AM-5:00PM F 8:00AM-5:00PM SA 9:00AM-4:00PM Website: N/A

INTERVENTIONAL CARDIOLOGY
PARKS, MONICA
Provider ID: 302414 Board Certified Specialty: No
906 SYCAMORE AVE STE 104 VISTA, CA 92081 Phone: (760) 630-2550 Fax: (760) 726-2305
After Hours Phone: (760) 630-2550 Provider Gender: Female NPI: 1740634971
Provider English Spoken: Y Provider Language(s) Spoken: Spanish, Vietnamese Cultural Competency: N Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER Hours: M-TH 8:00AM-5:00PM F 8:00AM-5:00PM SA 9:00AM-4:00PM Website: N/A

OBSTETRICS / GYNECOLOGY
ARRIETA, IRIS
Provider ID: 290607 Board Certified Specialty: No
1000 VALE TERRACE DR VISTA, CA 92084 Phone: (760) 631-5000 Fax: (760) 414-3892
After Hours Phone: (760) 631-5000 Provider Gender: Female NPI: 1659614303
Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: TRI CITY MEDICAL CTR, Rady CHILDREN'S HOSPITAL SAN DIEGO, SHARP MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM Website: N/A

OBSTETRICS / GYNECOLOGY
BINDER, PRATIBHA
Provider ID: 282168 Board Certified Specialty: No
910 SYCAMORE AVE STE 102 VISTA, CA 92081 Phone: (800) 926-8273 Fax: (888) 539-8781
After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1174758031
Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON Medi-Cal Open Panel: Yes Min/Max Age: 0\999 American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER Hours: M-F 8:00AM-5:00PM Website: N/A

OBSTETRICS / GYNECOLOGY
DIETERICH, FREDERICK
Provider ID: 304868 Board Certified Specialty: No
1000 VALE TERRACE DR VISTA, CA 92084 Phone: (760) 631-5000 Fax: (760) 414-3892
After Hours Phone: (760) 631-5000 Provider Gender: Male NPI: 1720183650
Provider English Spoken: Y Cultural Competency: N
D3. 專業提供者目錄

Hospital Affiliation: Providence St Jude Medical Center, PLACENTIA LINDA HOSP, Foothill Regional Medical Center, LOS ALAMITOS MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 9:00AM-4:00PM
Website: N/A

OBSTETRICS / GYNECOLOGY
HAWKINS, MELISSA
Provider ID: 290596
Board Certified Specialty: No
1000 VALE TERRACE DR VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3755
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1851620447
Provider English Spoken: Y
Provider Language(s) Spoken: French, Spanish
Cultural Competency: N
Hospital Affiliation: TRI CITY MEDICAL CTR, PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 16\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-T 9:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

OPTOMETRIST
GEE, JENNIFER
Provider ID: 273114
Board Certified Specialty: No
134 GRAPEVINE RD VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1336589332
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: COMMUNITY REGIONAL MEDICAL CENTER-FRESNO, CALIFORNIA PACIFIC MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU 9:30AM-5:00PM
W 8:00AM-5:00PM
TH 10:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A
D3. 專業提供者目錄

MEDICAL CENTER-FRESNO, CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

ACCESSIBILITY: CONTACT PROVIDER

Hours: M-TH 8:00AM-8:00PM
F 9:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

OPTOMETRIST
GEE, JENNIFER
Provider ID: 290208
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1336589332
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation:
COMMUNITY REGIONAL
MEDICAL CENTER-FRESNO, CALIFORNIA PACIFIC
MEDICAL CENTER - D P APH
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

ACCESSIBILITY: CONTACT PROVIDER

Hours: SU 8:00AM-5:00PM
M-F 8:00AM-5:00PM
Website: N/A

OPTOMETRIST
KIM, MICHAEL
Provider ID: 290697
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 1164546313
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N

ACCESSIBILITY: CONTACT PROVIDER

Hours: M-W 8:00AM-5:00PM
D3. 專業提供者目錄

TH 10:30AM-7:30PM
F 8:00AM-5:00PM
Website: N/A

OPTOMETRIST
KIM, MICHAEL
Provider ID: 245239
Board Certified Specialty: No
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Male
NPI: 245239
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
MORA, WENDY
Provider ID: 290236
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1376958389
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
MORA, WENDY
Provider ID: 242634
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1376958389
Provider English Spoken: Y
Provider Language(s) Spoken: Spanish
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

OPTOMETRIST
TAM, EMILY
Provider ID: 277978
Board Certified Specialty: No
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1497161236
Provider English Spoken: Y
Provider Language(s) Spoken: Mandarin
Cultural Competency: N
**OPTOMETRIST**

**TAM, EMILY**

Provider ID: 290315
Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female
NPI: 1497161236

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

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

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

Website: N/A

**OPTOMETRIST**

**TRAN, JESSICA**

Provider ID: 304596
Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female
NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

**OPTOMETRIST**

**TRAN, JESSICA**

Provider ID: 303733
Board Certified Specialty: No

134 GRAPEVINE RD
VISTA, CA 92083

Phone: (760) 631-5000
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Provider Gender: Female
NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

**OPTOMETRIST**

**TRAN, JESSICA**

Provider ID: 303729
Board Certified Specialty: No

1000 VALE TERRACE DR
VISTA, CA 92084

Phone: (760) 631-5000
Fax: (760) 414-3702

After Hours Phone: (760) 631-5000

Provider Gender: Female
NPI: 1457922957

Provider English Spoken: Y
Cultural Competency: N

Medi-Cal Open Panel: Yes
Min/Max Age: 5\21

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A
OPTOMETRIST
TRAN, JESSICA
Provider ID: 304595
Board Certified Specialty: No
Provider ID: 304595
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3702
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1457922957
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\18
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

PHYSICIANS ASSISTANT
WALLACE, STEPHANIE
Provider ID: 239770
Board Certified Specialty: No
Provider ID: 239770
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (888) 216-8482
Provider Gender: Female
NPI: 1619115664
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: PALOMAR MEDICAL CENTER
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 8:00AM-5:00PM
TU-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM
Website: N/A

PODIATRIST
MILLER, JULIE
Provider ID: 305464
Board Certified Specialty: No
Provider ID: 305464
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Provider Gender: Female
NPI: 1518104942
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A
### PODIATRIST

**MILLER, JULIE**  
Provider ID: 290666  
Board Certified Specialty: No  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000  
Fax: (760) 414-3763  
After Hours Phone: (760) 631-5000  
Provider Gender: Female  
Provider ID: 290666  
Board Certi  
fic Specialty: No  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000  
Fax: (760) 414-3763  
After Hours Phone: (760) 631-5000  
Provider Gender: Female  
NPI: 1619115664  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, NATIVIDAD MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

### PULMONARY DISEASES

**BAUTISTA, JENNIFER**  
Provider ID: 300864  
Board Certified Specialty: No  
2067 W VISTA WAY STE 160  
VISTA, CA 92083  
Phone: (760) 230-8994  
Fax: (760) 944-1309  
After Hours Phone: (760) 230-8994  
Provider Gender: Female  
Provider ID: 300864  
Board Certi  
fic Specialty: No  
2067 W VISTA WAY STE 160  
VISTA, CA 92083  
Phone: (760) 230-8994  
Fax: (760) 944-1309  
After Hours Phone: (760) 230-8994  
Provider Gender: Female  
NPI: 1770727034  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, NATIVIDAD MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 21\199  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

### REGISTERED PHYSICAL THERAPIST

**AMBROSE, CHRISTOPHER**  
Provider ID: 248009  
Board Certified Specialty: No  
2067 W VISTA WAY STE 185  
VISTA, CA 92083  
Phone: (760) 631-5888  
Fax: (760) 631-5880  
After Hours Phone: (760) 591-7750  
Provider Gender: Male  
NPI: 1114977535  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 8\125  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

### SURGERY GENERAL

**ARMANI, AVA**  
Provider ID: 282144  
Board Certified Specialty: No  
910 SYCAMORE AVE STE 102  
VISTA, CA 92081  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1861759383  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: MEDICAL CTR AT UCSF, UCSF Medical Center At Mission Bay, UCSF MEDICAL CENTER AT MOUNT ZION, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM  
Website: N/A

**GROVE, JAY**  
Provider ID: 245227  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL ENCINITAS, COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA, NATIVIDAD MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M 7:00AM-7:00PM  
TU 7:00AM-5:00PM  
W 7:00AM-7:00PM  
TH 7:00AM-5:00PM  
F 7:00AM-7:00PM  
Website: N/A
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<th>Professional Directory</th>
<th>Provider ID</th>
<th>Board Certified Specialty</th>
<th>Phone</th>
<th>After Hours Phone</th>
<th>Provider Gender</th>
<th>NPI</th>
<th>Provider Language(s)</th>
<th>Cultural Competency</th>
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<tr>
<td>D3. 專業提供者目錄</td>
<td>241737</td>
<td>No</td>
<td>(760) 300-3647</td>
<td>(760) 300-3647</td>
<td>Male</td>
<td>1912971334</td>
<td>Spanish</td>
<td>N</td>
<td>PALOMAR HEALTH, PALOMAR MEDICAL CENTER, TRI CITY MEDICAL CTR, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MERCY HOSPITAL</td>
<td>Yes</td>
<td>0-999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F</td>
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<tr>
<td></td>
<td>255940</td>
<td>No</td>
<td>(951) 677-1111</td>
<td>(951) 677-1111</td>
<td>Female</td>
<td>1619014479</td>
<td></td>
<td>N</td>
<td>UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</td>
<td>Yes</td>
<td>0-999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F</td>
<td>N/A</td>
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<tr>
<td></td>
<td>287654</td>
<td>No</td>
<td>(951) 677-9757</td>
<td>(951) 677-9757</td>
<td>Male</td>
<td>1417243239</td>
<td>German</td>
<td>N</td>
<td>UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</td>
<td>Yes</td>
<td>18-999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>M-F</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**WILDOMAR**

**ANESTHESIOLOGY**

**HYLTON, DIANA**

Provider ID: 241737

Board Certified Specialty: No

36485 INLAND VALLEY DR

WILDOMAR, CA 92595

Phone: (800) 926-8273

After Hours Phone: (800) 926-8273

**KRAUSE, MARTIN**

Provider ID: 287654

Board Certified Specialty: No

36485 INLAND VALLEY DR

WILDOMAR, CA 92595

Phone: (951) 677-1111

After Hours Phone: (951) 677-1111

Provider Gender: Male

NPI: 1417243239

Provider Language(s)

Spoken: German

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

**EMERGENCY MEDICINE**

**LI, JINGHONG**

Provider ID: 255940

Board Certified Specialty: No

36485 INLAND VALLEY DR

WILDOMAR, CA 92595

Phone: (951) 677-1111

After Hours Phone: (951) 677-1111

Provider Gender: Female

NPI: 1619014479

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON

**PULMONARY DISEASES**

**KUMAR, AVNEE**

Provider ID: 300013

Board Certified Specialty: No

36485 INLAND VALLEY DR

WILDOMAR, CA 92595
D3. 專業提供者目錄

 PhoneNumber: (951) 677-1111
Fax: (951) 677-9757
After Hours Phone: (951) 677-1111
Provider Gender: Female
NPI: 1750745394
Provider English Spoken: Y
Cultural Competency: N
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Website: N/A

PULMONARY DISEASES
SURI, RAJAT
Provider ID: 283349
Board Certified Specialty: No
36485 INLAND VALLEY DR
WILDOMAR, CA 92595
PhoneNumber: (951) 677-1111
Fax: (951) 677-9757
After Hours Phone: (951) 677-1111
Provider Gender: Male
NPI: 1144615337
Provider English Spoken: Y
Cultural Competency: N
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA
JOHN SALLY THORNTON
Medi-Cal Open Panel: Yes
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
Website: N/A

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D4. 醫院名錄 - 普通急症醫院

**SAN DIEGO**

**ALVARADO HOSPITAL LLC**
Provider ID: 170056
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (619) 287-3270
After Hours Phone: (619) 287-3270
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO

Hours: M-F
8:00AM-4:30PM
License Number: N/A
NPI: 1528041811
Website: www.sharp.com/hospitals/grossmont/
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Birthing Friendly: Y

**KINDRED HOSPITAL SAN DIEGO**
Provider ID: 169663
1940 EL CAJON BLVD
SAN DIEGO, CA 92104
Phone: (619) 543-4500
After Hours Phone: (619) 543-4500
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week
License Number: 080000006
NPI: 1528041811
Website: www.sharp.com/hospitals/grossmont/
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Birthing Friendly: Y

**ESCONDIDO**

**PALOMAR MEDICAL CENTER**
Provider ID: 173011
2185 CITRACADO PKWY
ESCONDIDO, CA 92029
Phone: (442) 281-5000
After Hours Phone: (442) 281-5000
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week
License Number: N/A
NPI: 1376513754
Website: www.palomarhealth.org/facilities/palomar-powell-outpatient
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Birthing Friendly: Y

**POWAY**

**PALOMAR HEALTH**
Provider ID: 170052
15615 POMERADO RD
POWAY, CA 92064
Phone: (858) 613-4000
After Hours Phone: (858) 613-4000
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week
License Number: N/A
NPI: 1376513754
Website: www.palomarhealth.org/facilities/palomar-powell-outpatient

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
**D4. 醫院名錄 - 普通急症醫院**

**MEDICAL CENTER**

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

**NATIONAL CITY**

**PARADISE VALLEY HOSPITAL**

Provider ID: 170057

2400 E 4TH ST
NATIONAL CITY, CA 91950

Phone: (619) 470-4321
After Hours Phone: (619) 470-4321

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week
License Number: N/A
NPI: 1710065933

Website: www.rchsd.org

**LA JOLLA**

**SCRIPPS GREEN HOSPITAL**

Provider ID: 171084

10666 N TORREY PINES RD
MS 220
LA JOLLA, CA 92037

Phone: (858) 455-9100
After Hours Phone: (858) 455-9100

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week
License Number: 080000050
NPI: 1841277704

Website: www.scripps.org/locations/hospitals__scripps-green-hospital

**ENCINITAS**

**SCRIPPS MEMORIAL HOSPITAL ENCINITAS**

Provider ID: 170305

354 SANTA FE DR
ENCINITAS, CA 92024

Phone: (760) 753-6501
After Hours Phone: (760) 753-6501

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status:
D4. 醫院名錄 - 普通急症醫院

JCAHO

| Hours: 24 Hours / 7 days/week |
| License Number: 080000148 |
| NPI: 1700829199 |

Website: www.scripps.org/locations/hospitals__scripps-memorial-hospital-encinitas

American Sign Language (ASL): 

Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

**CHULA VISTA**

**SCRIPPS MERCY HOSPITAL**

**CHULA VISTA**

Provider ID: 170256

435 H ST

CHULA VISTA, CA 91910

Phone: (619) 691-7000

After Hours Phone: (619) 691-7000

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status: JCAHO

| Hours: 24 Hours / 7 days/week |
| License Number: N/A |
| NPI: 1659359446 |

Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

**CHULA VISTA**

**SHARP CHULA VISTA MED CTR**

Provider ID: 170251

751 MEDICAL CENTER CT

CHULA VISTA, CA 91911

Phone: (619) 502-5800

After Hours Phone: (619) 502-5800

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status: JCAHO

| Hours: 24 Hours / 7 days/week |
| License Number: 090000074 |
| NPI: 1659359446 |

Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

**SAN DIEGO**

**SELECT SPECIALTY HOSPITAL**

**SAN DIEGO**

Provider ID: 170165

555 WASHINGTON ST

SAN DIEGO, CA 92103

Phone: (619) 260-8300

After Hours Phone: (619) 260-8300

Accepting New Patients: No

Birth Friendly: Y

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status: JCAHO

| Hours: 24 Hours / 7 days/week |
| License Number: 090000404 |
| NPI: 1639172133 |

Website: www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-san-diego

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

**SAN DIEGO**

**SHARP CHULA VISTA MED CTR**

Provider ID: 170251

751 MEDICAL CENTER CT

CHULA VISTA, CA 91911

Phone: (619) 502-5800

After Hours Phone: (619) 502-5800

Accepting New Patients: No

Min/Max Age: 0\150

Site English Spoken: Y

Cultural Competency: N

Hospital Accreditation Status: JCAHO

| Hours: 24 Hours / 7 days/week |
| License Number: 090000008 |
| NPI: 1396728630 |

Website: www.sharp.com/hospitals/chula-vista/

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

2236
D4. 醫院名錄 - 普通急症醫院

**CORONADO**

SHARP CORONADO HOSP AND HEALTHCARE CTR
Provider ID: 170252
250 PROSPECT PL
CORONADO, CA 92118
Phone: (619) 522-3600
After Hours Phone: (619) 522-3600
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: 080000039
NPI: 1407839921
Website: www.sharp.com
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SHARP MEMORIAL HOSPITAL
Provider ID: 170047
7901 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 939-3400
After Hours Phone: (858) 939-3400
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: N/A
NPI: 1407839921
Website: www.sharp.com/hospitals/coronado/
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**SAN DIEGO**

SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNs
Provider ID: 170054
3003 HEALTH CENTER DR
SAN DIEGO, CA 92123
Phone: (858) 939-3400
After Hours Phone: (858) 939-3400
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: N/A
NPI: 1407839921
Website: www.sharp.com/hospitals/coronado/
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

UCSD LA JOLLA JOHN SALLY THORNTON
Provider ID: 170053
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 657-7000
After Hours Phone: (858) 657-7000
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: 090000101
NPI: 1497021265
Website: www.ucsd.org
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

**OCEANSIDE**

TRI CITY MEDICAL CTR
Provider ID: 170049
4002 VISTA WAY
OCEANSIDE, CA 92056
Phone: (760) 724-8411
After Hours Phone: (760) 724-8411
Accepting New Patients: No
Min/Max Age: 0\150
Site English Spoken: Y
Cultural Competency: N
Hospital Accreditation Status: JCAHO
Hours: 24 Hours / 7 days/week
License Number: 0900000101
NPI: 1497021265
Website: N/A
American Sign Language (ASL): N

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
SAN DIEGO

UCSD MEDICAL CTR

Provider ID: 170051

200 W ARBOR DR
SAN DIEGO, CA 92103

Phone: (619) 543-6222
After Hours Phone: (619) 543-6222

Accepting New Patients: No
Min/Max Age: 0\150

Site English Spoken: Y
Cultural Competency: N

Hospital Accreditation Status: JCAHO

Hours: 24 Hours / 7 days/week
License Number: 090000101
NPI: 1184722779

Website: https://health.ucsd.edu/locations/pages/hillcrest.aspx

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Birthing Friendly: Y
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

### CARLSBAD

**LA COSTA HOUSE**

Provider ID: 662923

6433 FLAMENCO ST
CARLSBAD, CA 92009

Phone: (760) 721-1706
Fax: (760) 721-9872

After Hours Phone: (760) 721-1706

Accepting New Patients: No

NPI: 1962488007

Website: N/A

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### SOUTH BAY POST ACUTE CARE

Provider ID: 394308

553 F ST
CHULA VISTA, CA 91910

Phone: (619) 426-8611
Fax: (619) 240-7378

After Hours Phone: (619) 426-8611

Accepting New Patients: No

Hours: M-F 9:00AM-5:30PM

NPI: 1376946277

Website: http://southbaypostacute.com

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### CHULA VISTA

**BIRCH PATRICK CONV CTR**

Provider ID: 171998

751 MEDICAL CENTER CT
CHULA VISTA, CA 91911

Phone: (619) 502-3600
Fax: (619) 502-5835

After Hours Phone: (619) 502-3600

Accepting New Patients: No

NPI: 1538142369

Website: www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### CORONADO

**VILLA CORONADO CONVALESCENT**

Provider ID: 172644

233 PROSPECT PL
CORONADO, CA 92118

Phone: (619) 552-3900
Fax: (619) 522-3939

After Hours Phone: (619) 552-3900

Accepting New Patients: No

NPI: 1184607418

Website: www.sharp.com/hospitals/coronado/departments/long-term-care.cfm

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### EL CAJON

**AVOCADO POST ACUTE**

Provider ID: 171985

510 E WASHINGTON AVE
EL CAJON, CA 92020

Phone: (619) 440-1211
Fax: (619) 956-3929

After Hours Phone: (619) 440-1211

Accepting New Patients: No

NPI: 1568484517

Website: www.avocadopostacute.com

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### COTTONWOOD CANYON HEALTHCARE CENTER

Provider ID: 171983

1391 E MADISON AVE
EL CAJON, CA 92021

Phone: (619) 444-1107
COUNTRY HILLS POST ACUTE
Provider ID: 503510
1580 BROADWAY
EL CAJON, CA 92021
Phone: (619) 441-8745
Fax: (619) 441-9029
After Hours Phone: (619) 441-8745
Accepting New Patients: No
NPI: 1063974285
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

COUNTRY HILLS HEALTH CARE CENTER
Provider ID: 416853
1580 BROADWAY
EL CAJON, CA 92021
Phone: (619) 441-8745
After Hours Phone: (619) 441-8745
Accepting New Patients: No
NPI: 1700973963
Website: www.countryhills.com
Credentials and/or certifications:
Site English Spoken: Y
Site Languages(s) Spoken: American Sign Language, Arabic, Korean, Spanish, Tagalog, Farsi, Vietnamese, Mandarin
Cultural Competency: N
American Sign Language (ASL): Y
Accessibility: CONTACT PROVIDER

GRANITE HILLS HEALTHCARE AND WELLNESS CENTRE LLC
Provider ID: 286282
1340 E MADISON AVE
EL CAJON, CA 92021
Phone: (619) 447-1020
Fax: (619) 447-1024
After Hours Phone: (619) 447-1020
Accepting New Patients: No
NPI: 1346516937
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PARKSIDE HEALTH AND WELLNESS CENTER
Provider ID: 349923
444 W LEXINGTON AVE
EL CAJON, CA 92020
Phone: (619) 442-7744
After Hours Phone: (619) 442-7744
Accepting New Patients: No
NPI: 1447653340
Website: http://parksidehealth.net
Credentials and/or certifications:
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MAGNOLIA POST ACUTE CARE
Provider ID: 380518
635 S MAGNOLIA AVE
EL CAJON, CA 92020
Phone: (619) 442-8826
Fax: (619) 442-0288
After Hours Phone: (619) 442-8826
Accepting New Patients: No
NPI: 1316340227
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

<table>
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<tr>
<th>PROVIDER</th>
<th>N</th>
<th>Accessibility: CONTACT PROVIDER</th>
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<tbody>
<tr>
<td>SAN DIEGO POST ACUTE CENTER</td>
<td>☑</td>
<td>Provider ID: 173508</td>
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<tr>
<td>☀ 1201 S ORANGE AVE</td>
<td>☐</td>
<td>EL CAJON, CA 92020</td>
</tr>
<tr>
<td>☒ Phone: (619) 441-1988</td>
<td>☒</td>
<td>Fax: (619) 441-7416</td>
</tr>
<tr>
<td>☒ After Hours Phone: (619) 441-1988</td>
<td>☒</td>
<td>Accepting New Patients: No</td>
</tr>
<tr>
<td>☒ NPI: 1285061085</td>
<td>☒</td>
<td>Website: <a href="http://sdpostacute.com">http://sdpostacute.com</a></td>
</tr>
<tr>
<td>☐ Credentials and/or certifications:</td>
<td>☐</td>
<td>Site English Spoken: Y</td>
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<tr>
<td>☐ Cultural Competency: N</td>
<td>☐</td>
<td>American Sign Language (ASL): N</td>
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<td>☐ Accessibility: CONTACT PROVIDER</td>
<td>☐</td>
<td>PROVIDER</td>
</tr>
</tbody>
</table>

| THE BRADLEY COURT | ☑ | Provider ID: 419158 |
| ☀ 675 E BRADLEY AVE | ☐ | EL CAJON, CA 92021 |
| ☒ Phone: (619) 448-6633 | ☒ | Fax: (619) 448-5462 |
| ☒ After Hours Phone: (619) 448-6633 | ☒ | Accepting New Patients: No |
| ☒ NPI: 1629129267 | ☒ | Website: N/A |
| ☐ Credentials and/or certifications: | ☐ | Site English Spoken: Y |
| ☐ Site Languages(s) Spoken: Tagalog, Spanish | ☐ | Cultural Competency: N |
| ☐ American Sign Language (ASL): N | ☐ | Accessibility: CONTACT PROVIDER |

| VICTORIA POST ACUTE CARE | ☑ | Provider ID: 387720 |
| ☀ 654 S ANZA ST | ☐ | EL CAJON, CA 92020 |
| ☒ Phone: (619) 440-5005 | ☒ | Fax: (619) 440-5005 |
| ☒ After Hours Phone: (619) 440-5005 | ☒ | Accepting New Patients: No |
| ☒ NPI: 1326441239 | ☒ | Website: http://victoriapostacute.com |
| ☒ Credentials and/or certifications: | ☒ | Site English Spoken: Y |
| ☒ Site English Spoken: Y | ☒ | Cultural Competency: N |
| ☐ Tagalog, Spanish | ☐ | American Sign Language (ASL): N |
| ☐ Accessibility: CONTACT PROVIDER | ☐ | PROVIDER |

| VILLA LAS PALMAS HEALTHCARE CTR | ☑ | Provider ID: 172020 |
| ☀ 622 S ANZA ST | ☒ | EL CAJON, CA 92020 |
| ☐ Phone: (619) 442-0544 | ☐ | Fax: (619) 442-0544 |
| ☒ After Hours Phone: (619) 442-0544 | ☒ | Accepting New Patients: No |
| ☒ NPI: 1023048295 | ☒ | Website: http://villalaspalmascares.com |
| ☒ Credentials and/or certifications: | ☒ | Site English Spoken: Y |
| ☐ Site English Spoken: Y | ☐ | Cultural Competency: N |
| ☐ Tagalog, Spanish | ☐ | American Sign Language (ASL): N |
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

- **AVIARA HEALTHCARE CENTER**
  Provider ID: 171995
  944 REGAL RD
  ENCINITAS, CA 92024
  Phone: (760) 944-0331
  After Hours Phone: (760) 944-0331
  Accepting New Patients: No
  NPI: 1518146620
  Website: [http://aviarahealthcare.com](http://aviarahealthcare.com)
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Site Languages(s) Spoken: Tagalog, Spanish
  - Cultural Competency: N
  - American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

- **ENCINITAS NURSING AND REHAB CTR**
  Provider ID: 171977
  900 SANTA FE DR
  ENCINITAS, CA 92024
  Phone: (760) 753-6423
  Fax: (760) 753-4979
  After Hours Phone: (760) 753-6423
  Accepting New Patients: No
  Hours: M-F 8:00AM-5:00PM
  NPI: 1588660765
  Website: [http://lifecarecentrofescondido.com](http://lifecarecentrofescondido.com)
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Cultural Competency: N
  - American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

- **THE DORTHY AND JOSEPH GOLGBERG HEALTHCARE CENTER**
  Provider ID: 172000
  211 SAXONY RD
  ENCINITAS, CA 92024
  Phone: (760) 632-0081
  Fax: (760) 516-2016
  After Hours Phone: (760) 632-0081
  Accepting New Patients: No
  Hours: M-F 7:00AM-4:00PM
  NPI: 1659482032
  Website: [http://lifecarecentrofescondido.com](http://lifecarecentrofescondido.com)
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Tagalog, Spanish
  - Cultural Competency: N
  - American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

- **ESCONDIDO CARE CENTER**
  Provider ID: 172027
  421 E MISSION AVE
  ESCONDIDO, CA 92025
  Phone: (760) 747-0430
  After Hours Phone: (760) 747-0430
  Accepting New Patients: No
  Hours: M-F 8:00AM-4:30PM
  NPI: 1588660765
  Website: [http://escondidostacute.com](http://escondidostacute.com)
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Tagalog, Spanish
  - Cultural Competency: N
  - American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

- **LIFE CARE CENTER OF ESCONDIDO**
  Provider ID: 172010
  1980 FELICITA RD
  ESCONDIDO, CA 92025
  Phone: (760) 741-6109
  After Hours Phone: (760) 741-6109
  Accepting New Patients: No
  NPI: 1386681286
  Website: [http://lifecarecentrofescondido.com](http://lifecarecentrofescondido.com)
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Cultural Competency: N
  - American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER

- **PALOMAR HEIGHTS CARE CTR**
  Provider ID: 170055
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

- 1260 E OHIO AVE
  ESCONDIDO, CA 92027
  Phone: (760) 746-1100
  After Hours Phone: (760) 746-1100
  Accepting New Patients: No
  NPI: 1255337440
  Website: http://palomarheightsrehab.com
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Site Languages(s) Spoken: Spanish, Tagalog
  - Cultural Competency: N
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- VALLE VISTA POST ACUTE
  Provider ID: 171968
  1025 W 2ND AVE
  ESCONDIDO, CA 92025
  Phone: (760) 745-1842
  Fax: (760) 745-4346
  After Hours Phone: (760) 745-1842
  Accepting New Patients: No
  Hours: M-F
  8:00AM-5:00PM
  NPI: 1659369262
  Website: www.covenantcare.com
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Cultural Competency: N
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- PALOMAR VISTA
  HEALTHCARE CTR
  Provider ID: 171988
  201 N FIG ST
  ESCONDIDO, CA 92025
  Phone: (760) 746-0303
  Fax: (760) 738-1749
  After Hours Phone: (760) 746-0303
  Accepting New Patients: No
  NPI: 1861491490
  Website: http://palomarvista.com
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Cultural Competency: N
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- FALLBROOK
  FALLBROOK SKILLED NURSING
  Provider ID: 298744
  325 POTTER ST
  FALLBROOK, CA 92028
  Phone: (760) 728-2330
  Fax: (909) 863-4644
  After Hours Phone: (760) 728-2330
  Accepting New Patients: No
  Hours: M-F
  8:00AM-5:00PM
  NPI: 1265823264
  Website: www.progressivecarecenters.com
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Cultural Competency: N
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- VIA RIO HOUSE
  Provider ID: 662930
  1262 VIA ENCINOS DR
  FALLBROOK, CA 92028
  Phone: (760) 547-1976
  Fax: (760) 721-9872
  After Hours Phone: (760) 547-1976
  Accepting New Patients: No
  NPI: 1962488007
  Website: N/A
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Cultural Competency: N
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- FALLBROOK
  FALLBROOK SKILLED NURSING
  Provider ID: 298744
  325 POTTER ST
  FALLBROOK, CA 92028
  Phone: (760) 728-2330
  Fax: (909) 863-4644
  After Hours Phone: (760) 728-2330
  Accepting New Patients: No
  Hours: M-F
  8:00AM-5:00PM
  NPI: 1265823264
  Website: www.progressivecarecenters.com
  Credentials and/or certifications:
  - Site English Spoken: Y
  - Cultural Competency: N
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER

- LA JOLLA
  LA JOLLA NURSING AND REHAB CTR
  Provider ID: 171975
  2552 TORREY PINES RD
  LA JOLLA, CA 92037
  Phone: (858) 453-5810
  Fax: (858) 214-1212
  After Hours Phone: (858) 453-5810
  Accepting New Patients: No
  Hours: M-F
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

<table>
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<th>號碼</th>
<th>機構名稱</th>
<th>提供者 ID</th>
<th>地址</th>
<th>電話</th>
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<tr>
<td>1.</td>
<td>THE COVE AT LA JOLLA</td>
<td>305514</td>
<td>7160 FAY AVE, LA JOLLA, CA 92037</td>
<td>(858) 459-4361</td>
</tr>
<tr>
<td>2.</td>
<td>CARE MERIDIAN LA MESA</td>
<td>173379</td>
<td>5640 AZTEC DR, LA MESA, CA 91942</td>
<td>(949) 263-6632</td>
</tr>
<tr>
<td>3.</td>
<td>GROSSMONT POST ACUTE</td>
<td>172023</td>
<td>5696 LAKE MURRAY BLVD, LA MESA, CA 91942</td>
<td>(619) 460-7871</td>
</tr>
</tbody>
</table>

#### 長期護理 (LTC) 和熟練護理機構 (SNF)

LA MESA, CA 91942

- ** Phone: (619) 460-2330  
- ** After Hours Phone: (619) 460-2330  
- ** Accepting New Patients: No  
- ** NPI: 1356345706  
- ** Website: www.lifegen.net/arborhills/  
- ** Credentials and/or certifications:  
  - Site English Spoken: Y  
  - Site Languages(s) Spoken: Tagalog, Spanish, Russian  
  - Cultural Competency: N  
  - American Sign Language (ASL): N  
- ** Accessibility: CONTACT PROVIDER

GROSSMONT HOSPITAL DP SNF

Provider ID: 172643  
5555 GROSSMONT CENTER DR, LA MESA, CA 91942  
- ** Phone: (619) 740-4110  
- ** After Hours Phone: (619) 740-4110  
- ** Accepting New Patients: No  
- ** NPI: 1417930249  
- ** Website: www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm  
- ** Credentials and/or certifications:  
  - Site English Spoken: Y  
  - Cultural Competency: N  
  - American Sign Language (ASL): N  
- ** Accessibility: CONTACT PROVIDER

#### 長期護理 (LTC) 和熟練護理機構 (SNF)

ARBOR HILLS NURSING CENTER

Provider ID: 172007  
7800 PARKWAY DR, LA MESA, CA 91942  
- ** Phone: (619) 460-2330  
- ** After Hours Phone: (619) 460-2330  
- ** Accepting New Patients: No  
- ** NPI: 1457345001  
- ** Website: N/A  
- ** Credentials and/or certifications:  
  - Site English Spoken: Y  
  - Cultural Competency: N  
  - American Sign Language (ASL): N  
- ** Accessibility: CONTACT PROVIDER

COUNTRY MANOR LA MESA HEALTHCARE CENTER

Provider ID: 172023  
5696 LAKE MURRAY BLVD, LA MESA, CA 91942  
- ** Phone: (619) 460-7871  
- ** After Hours Phone: (619) 460-7871  
- ** Accepting New Patients: No  
- ** NPI: 1457486078  
- ** Website: www.covenantcare.com  
- ** Credentials and/or certifications:  
  - Site English Spoken: Y  
  - Site Languages(s) Spoken: Spanish  
  - Cultural Competency: N  
  - American Sign Language (ASL): N  
- **Accessibility: CONTACT PROVIDER

#### 長期護理 (LTC) 和熟練護理機構 (SNF)

THE COVE AT LA JOLLA

Provider ID: 305514  
7160 FAY AVE, LA JOLLA, CA 92037  
- ** Phone: (858) 459-4361  
- ** After Hours Phone: (858) 459-4361  
- ** Accepting New Patients: No  
- ** Hours: M-F 7:30AM-4:00PM  
- ** NPI: 1588067482  
- ** Website: http://thecoveatla.jolla.com  
- ** Credentials and/or certifications:  
  - Site English Spoken: Y  
  - Cultural Competency: N  
  - American Sign Language (ASL): N  
- ** Accessibility: CONTACT PROVIDER
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

**CARE**

Provider ID: 310488

8787 CENTER DR
LA MESA, CA 91942

Phone: (619) 460-4444
Fax: (619) 713-5116

After Hours Phone: (619) 460-4444

Accepting New Patients: No

NPI: 1689077588

Website: http://grossmontpostacute.com

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**HILLDALE HABILITATION CENTER**

Provider ID: 527671

7979 LA MESA BLVD
LA MESA, CA 91942

Phone: (619) 465-8010
Fax: (619) 465-8348

After Hours Phone: (619) 465-8010

Accepting New Patients: No

- Hours: M-F 8:00AM-5:00PM
- NPI: 1073736427

Website: N/A

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**LA MESA HEALTHCARE CTR**

Provider ID: 172022

3780 MASSACHUSETTS AVE
LA MESA, CA 91941

Phone: (619) 465-1313
Fax: (619) 465-8429

After Hours Phone: (619) 465-1313

Accepting New Patients: No

NPI: 1003852666

Website: http://lamesahealthcare.com

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**PARKWAY HILLS NURSING & REHAB**

Provider ID: 417047

7760 PARKWAY DR
LA MESA, CA 91942

Phone: (619) 469-0124
Fax: (619) 828-7654

After Hours Phone: (619) 469-0124

Accepting New Patients: No

- Hours: M-TH 9:00AM-5:00PM
  F 5:00AM-5:00PM
- NPI: 1174926448

Website: N/A

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**LEMON GROVE**

**BELLA VISTA HEALTH CENTER**

Provider ID: 419062

7922 PALM ST
LEMON GROVE, CA 91945

Phone: (619) 644-1000
Fax: (619) 797-2920

After Hours Phone: (619) 644-1000

Accepting New Patients: No

NPI: 1760709687

Website: www.bellavistaealth.com

Credentials and/or certifications:

- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**LEMON GROVE CARE AND REHAB CTR**

Provider ID: 172013

8351 BROADWAY
LEMON GROVE, CA 91945

Phone: (619) 463-0294
Fax: (619) 461-1064

After Hours Phone: (619) 463-0294

Accepting New Patients: No

NPI: 1336134204

- Site Languages(s) Spoken: Farsi, Spanish, Tagalog
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D5. 長期服務與支援 (LTSS) 服務提供者
I. 長期護理 (LTC) 和熟練護理機構 (SNF)

Website: http://lemongrovecare.com
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

NATIONAL CITY

CASTLE MANOR NURSING AND REHABILITATION CTR
Provider ID: 171978
541 S V AVE
NATIONAL CITY, CA 91950
Phone: (619) 791-7900
Accepting New Patients: No
After Hours Phone: (619) 791-7900
NPI: 1497759856
Website: www.lifegen.net/castlemanor/index.html
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

PARADISE VALLEY HEALTHCARE CENTER
Provider ID: 171106
2575 E 8TH ST
NATIONAL CITY, CA 91950
Phone: (619) 470-6700
After Hours Phone: (619) 470-6700
Accepting New Patients: No
NPI: 1275513293
Website: http://pvhcc.com
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

FRIENDSHIP MANOR NURSING AND REHABILITATION CTR
Provider ID: 171973
902 EUCLID AVE
NATIONAL CITY, CA 91950
Phone: (619) 791-7700
Fax: (619) 791-7791
After Hours Phone: (619) 791-7700
Accepting New Patients: No
Hours: M-F
9:00AM-5:00PM
NPI: 1235133687
Website: www.lifegen.net/friendshipmanor/
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

WINDSOR GARDENS CONV CTR OF SAN DIEGO
Provider ID: 172011
220 E 24TH ST
NATIONAL CITY, CA 91950
Phone: (619) 474-6741
Fax: (619) 474-1925
After Hours Phone: (619) 474-6741
Accepting New Patients: No
NPI: 1730176538
Website: www.windsorcare.com
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

OCEANSIDE

LA PALOMA HEALTHCARE CTR
Provider ID: 172021
3232 THUNDER DR
OCEANSIDE, CA 92056
Phone: (760) 724-2193
After Hours Phone: (760) 724-2193
Accepting New Patients: No
NPI: 1265462436
Website: WWW.LAPALOMAHEALTHCARE.COM
Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish, Armenian, Korean, Tagalog
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

MCNEALY HOUSE
Provider ID: 662925
4602 ALLENDE AVE
OCEANSIDE, CA 92057
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BOULDER CREEK POST ACUTE
Provider ID: 276987
12696 MONTE VISTA RD
POWAY, CA 92064
Phone: (858) 487-6242
Fax: (858) 487-4282
After Hours Phone: (858) 487-6242
Accepting New Patients: No
- Hours: M-F
  8:00AM-5:30PM
NPI: 1073902672
Website: http://bouldercre ekpa.com
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

THE VILLAS AT POWAY
Provider ID: 172642
15615 POMERADO RD
POWAY, CA 92064
Phone: (858) 613-4545
After Hours Phone: (858) 613-4545
Accepting New Patients: No
NPI: 1619947090
Website: www.palomarheal th.org/skilled-nursing/villa -pomerado
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MICHALOWSKI HOME
Provider ID: 662925
4602 ALLENDE AVE
OCEANSIDE, CA 92057
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

POWAY HEALTHCARE CENTER
Provider ID: 171989
15632 POMERADO RD
POWAY, CA 92064
Phone: (858) 485-5153
Fax: (858) 485-7694
After Hours Phone: (858) 485-5153
Accepting New Patients: No
NPI: 1407035512
Website: http://powaycare. com
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

POWAY

SAN DIEGO

ACCESS TO INDEPENDENCE
Provider ID: 417267
8885 RIO SAN DIEGO DR
STE 131
SAN DIEGO, CA 92108
Phone: (619) 293-3500
Fax: (619) 704-2054
After Hours Phone: (619) 293-3500
Accepting New Patients: No
- Hours: M-F
  8:00AM-5:00PM
NPI: 1083039861
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

ARROYO VISTA NURSING CTR
Provider ID: 172028
3022 45TH ST
SAN DIEGO, CA 92105
Phone: (619) 283-5855
Fax: (619) 284-6327
After Hours Phone: (619) 283-5855
Accepting New Patients: No
Hours: SU-SA 9:00AM-5:00PM
NPI: 1720281409
Website: http://arroyovistacare.com
Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken: Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BRIGHTON PLACE SAN DIEGO
Provider ID: 402624
1350 EUCLID AVE
SAN DIEGO, CA 92105
Phone: (619) 263-2166
Fax: (619) 264-9231
After Hours Phone: (619) 263-2166
Accepting New Patients: No
NPI: 1487640066
Website: http://arroyovistacare.com
Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken: Mandarin, Spanish, Tagalog, Vietnamese
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BALBOA NURSING AND REHAB CTR
Provider ID: 416840
3520 4TH AVE
SAN DIEGO, CA 92103
Phone: (619) 291-5270
After Hours Phone: (619) 291-5270
Accepting New Patients: No
NPI: 1583816718
Website: http://balboahc.com
Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken: Tagalog, Armenian, Mandarin, Spanish, Russian, Korean, Vietnamese
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR
Provider ID: 171971
11895 AVENUE OF INDUSTRY
SAN DIEGO, CA 92128
Phone: (858) 673-0101
Fax: (858) 673-8320
After Hours Phone: (858) 673-0101
Accepting New Patients: No
NPI: 1083727093
Website: http://carmelmountain.net
Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken: Tagalog, Armenian, Mandarin, Spanish, Russian, Korean, Vietnamese
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GOLDEN HILL POST ACUTE
Provider ID: 614821
1201 34TH ST
SAN DIEGO, CA 92102
Phone: (619) 232-2946
Fax: (619) 702-7358
After Hours Phone: (619) 232-2946
Accepting New Patients: No
NPI: 1598229437
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish, Tagalog
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

HILLCREST HEIGHTS
HEALTHCARE CENTER
Provider ID: 509489
4033 6TH AVE
SAN DIEGO, CA 92103
Phone: (619) 297-4086
Fax: (619) 297-9238
After Hours Phone: (619) 297-4086
Accepting New Patients: No
Hours: M-F
8:00AM-5:00PM
NPI: 1558825067
Website: N/A
Credentials and/or certifications:
Site English Spoken: Y
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

JACOB HEALTH CARE CENTER
LLC
Provider ID: 172617
4075 54TH ST
SAN DIEGO, CA 92105
Phone: (619) 582-5168
Fax: (619) 325-0194
After Hours Phone: (619) 582-5168
Accepting New Patients: No
NPI: 1881684900
Website: www.jacobhealthcare.com
Credentials and/or certifications:
Site English Spoken: Y
Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MISSION HILLS POST ACUTE CARE
Provider ID: 339053
3680 REYNARD WAY
SAN DIEGO, CA 92103
Phone: (619) 297-4484
Fax: (855) 214-6992
After Hours Phone: (619) 297-4484
Accepting New Patients: No
NPI: 1669875563
Website: http://missionhillspostacute.com
Credentials and/or certifications:
Site English Spoken: Y
Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

REO VISTA HEALTHCARE CTR
Provider ID: 171993
6061 BANBURY ST
SAN DIEGO, CA 92139
Phone: (619) 475-2211
Fax: (619) 479-9126
After Hours Phone: (619) 475-2211
Accepting New Patients: No
NPI: 1255499174
Website: http://reovista.com
Credentials and/or certifications:
Site English Spoken: Y
Site Languages(s) Spoken: Tagalog, Spanish
Cultural Competency: N
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

RACY CHILDREN'S CONVALESCENT HOSPITAL
Provider ID: 172200
8022 BIRMINGHAM DR
SAN DIEGO, CA 92123
Phone: (858) 966-5833
Fax: (858) 966-8558
After Hours Phone: (858) 966-5833
Accepting New Patients: No
NPI: 1992881478
Website: www.rchsd.org
Credentials and/or certifications:
Website: N/A

ST PAULS HEALTH CARE CENTER
Provider ID: 288531
235 NUTMEG ST
SAN DIEGO, CA 92103
Phone: (619) 677-3895
After Hours Phone: (619) 677-3895
Accepting New Patients: No
NPI: 1972619104
Website: N/A
Credentials and/or certifications:
D5. 長期服務與支援 (LTSS) 服務提供者
I. 長期護理 (LTC) 和熟練護理機構 (SNF)

certifications: CMS
▌ Site English Spoken: Y
▌ Cultural Competency: N
▌ American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER

THE PAVILION AT OCEAN POINT
Provider ID: 262151
▌ 3202 DUKE ST
SAN DIEGO, CA 92110
▌ Phone: (619) 224-4141
▌ After Hours Phone: (619) 224-4141
Accepting New Patients: No
NPI: 1538174990
▌ Website: N/A
▌ Credentials and/or certifications:
▌ Site English Spoken: Y
▌ Cultural Competency: N
▌ American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER

UNIVERSITY CARE CENTER
Provider ID: 172024
▌ 5602 UNIVERSITY AVE
SAN DIEGO, CA 92105
▌ Phone: (619) 583-1993
▌ Fax: (619) 501-3559
▌ After Hours Phone: (619) 583-1993
Accepting New Patients: No
NPI: 1871522672
▌ Website: http://universitycarecenter.com
▌ Credentials and/or certifications:
▌ Site English Spoken: Y
▌ Site Languages(s) Spoken: Tagalog, Mandarin, Russian, Vietnamese, Farsi, Spanish
▌ Cultural Competency: N
▌ American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER

THE SPRINGS AT PACIFIC REGENT
Provider ID: 172008
▌ 3884 NOBEL DR
SAN DIEGO, CA 92122
▌ Phone: (858) 625-8700
▌ Fax: (858) 625-8777
▌ After Hours Phone: (858) 625-8700
Accepting New Patients: No
NPI: 1003198342
▌ Website: N/A
▌ Credentials and/or certifications:
▌ Site English Spoken: Y
▌ Cultural Competency: N
▌ American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER

VILLA RANCHO BERNARDO CARE CENTER
Provider ID: 172009
▌ 15720 BERNARDO CENTER DR
SAN DIEGO, CA 92127
▌ Phone: (858) 672-3900
▌ Fax: (310) 595-3529
▌ After Hours Phone: (858) 672-3900
Accepting New Patients: No
NPI: 1518063437
▌ Website: www.villaranchobernardo.com
▌ Credentials and/or certifications:
▌ Site English Spoken: Y
▌ Cultural Competency: N
▌ American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER

WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL
Provider ID: 172012
▌ 1201 34TH ST
SAN DIEGO, CA 92102
▌ Phone: (619) 232-2946
▌ Fax: (310) 595-3529
▌ After Hours Phone: (619) 232-2946
Accepting New Patients: No
NPI: 1811963028
▌ Website: https://windsorgoldenhill.com
▌ Credentials and/or certifications:
▌ Site English Spoken: Y
▌ Site Languages(s) Spoken: Spanish, Tagalog
▌ Cultural Competency: N
▌ American Sign Language (ASL): N
▌ Accessibility: CONTACT PROVIDER

SAN MARCOS

CARLO HOUSE
Provider ID: 662931
▌ 411 CARLO ST
SAN MARCOS, CA 92078
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

<table>
<thead>
<tr>
<th>PROVIDER</th>
<th>SPRING VALLEY</th>
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<tbody>
<tr>
<td>AMAYA SPRINGS HEALTH CARE CENTER</td>
<td>8625 LAMAR ST SPRING VALLEY, CA 91977</td>
</tr>
<tr>
<td>Provider ID: 420233</td>
<td>Phone: (323) 326-6186</td>
</tr>
<tr>
<td>Fax: (619) 461-3575</td>
<td>After Hours Phone: (323) 326-6186</td>
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<tr>
<td>Accepting New Patients: No</td>
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<td>NPI: 1184628554</td>
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<tr>
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<td>Website: <a href="http://www.lifegen.net/S">www.lifegen.net/S</a> tanfordcourt/</td>
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<th>MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC</th>
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<tr>
<td>STANFORD COURT SKILLED NURSING AND REHAB CENTER</td>
<td>8778 CUYAMACA ST SANTEE, CA 92071</td>
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<tr>
<td>Provider ID: 171994</td>
<td>Phone: (619) 449-5555</td>
</tr>
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<td>After Hours Phone: (619) 449-5555</td>
<td>Accepting New Patients: No</td>
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<td>Hours: SU-SA 8:00AM-5:00PM</td>
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<tr>
<td>AMAYA SPRINGS HEALTH CARE CENTER</td>
<td>9009 CAMPO RD SPRING VALLEY, CA 91977</td>
</tr>
<tr>
<td>Provider ID: 417094</td>
<td>Phone: (619) 460-2711</td>
</tr>
<tr>
<td>Fax: (619) 460-0451</td>
<td>After Hours Phone: (619) 460-2711</td>
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<td>BRIGHTON PLACE SPRING VALLEY</td>
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<th>MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC</th>
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<tr>
<td>MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC</td>
<td>325 KEMPTON ST SPRING VALLEY, CA 91977</td>
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<tr>
<td>Provider ID: 171969</td>
<td>Phone: (619) 931-1151</td>
</tr>
<tr>
<td>Fax: (224) 233-1397</td>
<td>After Hours Phone: (619) 931-1151</td>
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<td>Hours: SU-SA 8:00AM-5:00PM</td>
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<td>Website: <a href="http://www.mountmigue">www.mountmigue</a> lcoventanvillage.org</td>
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D5. 長期服務與支援 (LTSS) 服務提供者
Ⅰ. 長期護理 (LTC) 和熟練護理機構 (SNF)

guel.org
Credentials and/or
certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Valley Center

AMRENE HOME
Provider ID: 658588
📍 13873 OAKWOOD GLEN PL
VALLEY CENTER, CA 92082
📞 Phone: (760) 751-9879
Fax: (760) 749-3019
📞 After Hours Phone: (760) 751-9879
Accepting New Patients: No
NPI: 1700160405
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

GRACE HOUSE
Provider ID: 662919
📍 2507 HIBISCUS AVE
VISTA, CA 92081
📞 Phone: (760) 721-1706
Fax: (760) 721-9872
📞 After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

Vista

ANZA HOUSE
Provider ID: 662920
📍 1736 ANZA AVE
VISTA, CA 92084
📞 Phone: (760) 721-1706
Fax: (760) 721-9872
📞 After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1700160405
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

LA FUENTE POST ACUTE
Provider ID: 429590
📍 247 E BOBIER DR
VISTA, CA 92084
📞 Phone: (760) 945-3033
📞 After Hours Phone: (760) 945-3033
Accepting New Patients: No
📞 Hours: SU-SA
8:30AM-5:00PM
NPI: 1366802696
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

LIFE CARE CENTER OF VISTA
Provider ID: 171970
📍 304 N MELROSE DR
VISTA, CA 92083
📞 Phone: (760) 724-8222
Fax: (760) 941-4870
📞 After Hours Phone: (760) 724-8222
Accepting New Patients: No
📞 Hours: SU-SA
9:00AM-5:00PM
NPI: 1811942063
Website: www.lcca.com
Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken: Tagalog
- Cultural Competency: N
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

MARSHALL HOUSE
Provider ID: 662924
📍 758 S MELROSE DR
VISTA, CA 92081
📞 Phone: (760) 721-1706
Fax: (760) 721-9872
📞 After Hours Phone: (760)
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

MONTGOMERY HOUSE
Provider ID: 662927

1658 MONTGOMERY DR
VISTA, CA 92084
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ORIENTE HOUSE
Provider ID: 662928

3081 ORIENTE DR
VISTA, CA 92084
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

VISTA HOUSE
Provider ID: 662916

3081 ORIENTE DR
VISTA, CA 92084
Phone: (760) 721-1706
Fax: (760) 721-9872
After Hours Phone: (760) 721-1706
Accepting New Patients: No
NPI: 1962488007
Website: N/A
Credentials and/or certifications:
- Site English Spoken: Y
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

VISTA HEALTHCARE CENTER
Provider ID: 171990

247 E BOBIER DR
VISTA, CA 92084
Phone: (760) 945-3033
Fax: (760) 724-3169
After Hours Phone: (760) 945-3033
Accepting New Patients: No
Hours: M-F
NPI: 1093137762
Website: http://astorhealth.com
Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish, Tagalog
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

VISTA KNOLL SPECIALIZED CARE FACILITY
Provider ID: 172017

2000 WESTWOOD RD
VISTA, CA 92083
Phone: (760) 630-2273
Fax: (760) 630-0913

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8:00AM-5:00PM
NPI: 1912189812
Website: http://astorhealth.com
Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish, Tagalog
- Cultural Competency: N
- American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D5. 長期服務與支援 (LTSS) 服務提供者

I. 長期護理 (LTC) 和熟練護理機構 (SNF)

- After Hours Phone: (760) 630-2273
- Accepting New Patients: No
- Hours: SU-SA 8:30AM-5:00PM
- NPI: 1275533929
- Website: http://vistaknoll.com

Credentials and/or certifications:
- Site English Spoken: Y
- Site Languages(s) Spoken:
  - Korean, Tagalog,
  - Vietnamese, Spanish
- Cultural Competency: N
- American Sign Language (ASL):
  - N

Accessibility: CONTACT PROVIDER

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D5.長期服務與支援 (LTSS) 服務提供者
II. 縣居家支援服務 (IHSS)

SAN DIEGO

AGING & INDEPENDENCE SERVICES

Specialty: Case Management

5560 OVERLAND AVE
SAN DIEGO, CA 92123

Phone: (858) 495-5885
License Number: 1710308986

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

Website: https://www.sandiego.gov/content/sdc/hhsa/programs/ais/home_supportive_services.html
D5. 長期服務與支援 (LTSS) 服務提供者

III. 基於社群的成人服務 (CBAS) - 成人日間服務

### CHULA VISTA

**OPEN ARMS ADHC**

Provider ID: 417307

- **Address:** 301 E J ST, CHULA VISTA, CA 91910
- **Phone:** (619) 420-1404
- **Fax:** (619) 420-1408
- **After Hours Phone:** (619) 420-1404
- **Accepting New Patients:** No

<table>
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- **License Number:** 060002076
- **NPI:** 1598882169
- **Accessibility:** CONTACT PROVIDER
- **American Sign Language (ASL):** N
- **Language line interpreter services:** N
- **Cultural Competency:** N
- **Facility has access to skilled medical interpreters on site:** N
- **Interpreter Non-English Languages:** N
- **Website:** http://openarmsadhc.com

### EL CAJON

**EL CAJON ADHC**

Provider ID: 637126

- **Address:** 854 JACKMAN ST, EL CAJON, CA 92020
- **Phone:** (619) 328-2112
- **Fax:** (619) 328-0069
- **After Hours Phone:** (619) 328-2112
- **Accepting New Patients:** No

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<th>Hours: SU-SA</th>
<th>9:00AM-3:00PM</th>
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- **License Number:** 60000821
- **NPI:** 1487864468
- **Accessibility:** CONTACT PROVIDER
- **American Sign Language (ASL):** N
- **Language line interpreter services:** N
- **Cultural Competency:** N
- **Facility has access to skilled medical interpreters on site:** N
- **Interpreter Non-English Languages:** N
- **Website:** http://magnoliadhc.com

### WESTERN ADHC

Provider ID: 417305

- **Address:** 240 S MAGNOLIA AVE, EL CAJON, CA 92020
- **Phone:** (619) 631-7222
- **After Hours Phone:** (619) 631-7222
- **Accepting New Patients:** No

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- **License Number:** 550008511
- **NPI:** 1184207631
- **Accessibility:** CONTACT PROVIDER
- **American Sign Language (ASL):** N
- **Language line interpreter services:** N
- **Cultural Competency:** N
- **Facility has access to skilled medical interpreters on site:** N
- **Interpreter Non-English Languages:** N
- **Website:** N/A

### MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

- **Address:** 490 N MAGNOLIA AVE, EL CAJON, CA 92020
- **Phone:** (619) 444-1522
- **Fax:** (619) 444-1516
- **After Hours Phone:** (619) 444-1522

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- **License Number:** 60000821
- **NPI:** 1487864468
- **Accessibility:** CONTACT PROVIDER
- **American Sign Language (ASL):** N
- **Language line interpreter services:** N
- **Cultural Competency:** N
- **Facility has access to skilled medical interpreters on site:** N
- **Interpreter Non-English Languages:** N
- **Website:** N/A

### LA MESA

**GOLDEN LIFE ADHC**

Provider ID: 619502

- **Address:** 9158 FLETCHER PKWY, LA MESA, CA 91942
- **Phone:** (619) 357-7753
- **Fax:** (619) 439-6038
- **After Hours Phone:** (619) 357-7753

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- **License Number:** 1093921900
- **NPI:** 1093921900
- **Accessibility:** CONTACT PROVIDER
- **American Sign Language (ASL):** N
- **Language line interpreter services:** N
- **Cultural Competency:** N
- **Facility has access to skilled medical interpreters on site:** N
- **Interpreter Non-English Languages:** N
- **Website:** N/A

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Website: https://sites.google.com/site/westernadhcecc/contact-us

Website: http://openarmsadhc.com

Website: http://magnoliadhc.com

Website: http://openarmsadhc.com
### D5. 長期服務與支援 (LTSS) 服務提供者

#### III. 基於社群的成人服務 (CBAS) - 成人日間服務

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<td>NATIONAL CITY</td>
<td>HORIZON CBAS</td>
<td>642082</td>
<td>1035 HARBISON AVE</td>
<td>(619) 474-1822</td>
<td>(619) 474-1826</td>
<td>(858) 748-5044</td>
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<td>NATIONAL CITY, CA 91950</td>
<td>(619) 474-1822</td>
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<td>Interpreter Non-English Languages: N</td>
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<td>Website: N/A</td>
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</table>

2257
D5. 長期服務與支援 (LTSS) 服務提供者

III. 基於社群的成人服務 (CBAS) - 成人日間服務

CASA PACIFICA ADHCC
Provider ID: 417303
1424 30TH ST STE C
SAN DIEGO, CA 92154
Phone: (619) 424-8181
After Hours Phone: (619) 424-8181
Accepting New Patients: No
NPI: 1609920305
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
Website: www.casa-pacifica.com

SAN MARCOS

AMERICARE ADULT DAY HEALTH CARE CENTER
Provider ID: 420060
340 RANCHEROS DR STE 196
SAN MARCOS, CA 92069
Phone: (760) 682-2424
Fax: (760) 471-5104
After Hours Phone: (760) 682-2424
Accepting New Patients: No
License Number: 060000832
NPI: 1528271186
Accessibility: CONTACT PROVIDER
American Sign Language (ASL): N
Language line interpreter services: N
Cultural Competency: N
Facility has access to skilled medical interpreters on site?: N
Interpreter Non-English Languages: N
Website: www.americareadhc.com
D6. 心理健康名錄

**ALPINE**

**KHALEEL, AMMAR**
Provider Gender: Male
License Number: LCS110302
NPI: 1841744208
Provider English Spoken: Y Arabic
Cultural Competency: N
AMMAR KHALEEL

☎ 1620 ALPINE BLVD STE 110
ALPINE, CA 91901
☎ Phone: (619) 662-4100
☎ Fax: (619) 205-6305
☎ After Hours Phone: (619) 662-4100
☎ Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

**CELAYA, PATRICIA**
Provider Gender: Female
License Number: PSY33233
NPI: 1952656902
Provider English Spoken: Y Spanish
Cultural Competency: N
PATRICIA E CELAYA

☎ 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
☎ Fax: (619) 425-1184
☎ After Hours Phone: (619) 662-4100
☎ Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

**CHULA VISTA**

**BAYLON, ALDO**
Provider Gender: Male
License Number: PSY29904
NPI: 1649429150
Provider English Spoken: Y
Cultural Competency: N
ALDO BAYLON

☎ 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
☎ Fax: (619) 425-6941
☎ After Hours Phone: (619) 662-4100
☎ Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

**GALLO, LINDA**
Provider Gender: Female
License Number: PSY27375
NPI: 1427773621
Provider English Spoken: Y
Cultural Competency: N
LINDA C GALLO

☎ 780 BAY BLVD STE 200
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
☎ Fax: (619) 240-7852
☎ After Hours Phone: (619) 662-4100
☎ Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-8:00PM

**GOULD, HILARY**
Provider Gender: Female
License Number: PSY31088
NPI: 1104297696
Provider English Spoken: Y
Cultural Competency: N
HILARY GOULD

☎ 678 3RD AVE
CHULA VISTA, CA 91910
☎ Phone: (619) 662-4100
☎ Fax: (619) 271-0260
☎ After Hours Phone: (619) 662-4100
☎ Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
D6. 心理健康名錄

CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-6941
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

JUAREZ, AMERICA
Provider Gender: Female
License Number: LCS92516
NPI: 1386281541
Provider English Spoken: Y
Cultural Competency: N
AMERICA P JUAREZ
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

MALAK, LAWRENCE
Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N
LAWRENCE T MALAK
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
M-F 8:30AM-5:30PM
SA 8:00AM-2:30PM

OJHA, PRITI
Provider Gender: Female
License Number: A139807
NPI: 1760897284
Provider English Spoken: Y
Cultural Competency: N
PRITI OJHA
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
D6. 心理健康名錄

TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: SU 10:00AM-4:00PM
M-TU 8:30AM-8:00PM
W-F 8:30AM-5:30PM
SA 8:00AM-2:00PM

SHIELDS, SEBASTIAN
Provider Gender: Male
License Number: MFC124495
NPI: 1558895342
Provider English Spoken: Y
Spanish
Cultural Competency: N
SEBASTIAN L SHIELDS
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-4:00PM

WIJAYARATNE, IMANIE
Provider Gender: Male
License Number: PSY25044
NPI: 1932358355
Provider English Spoken: Y
Cultural Competency: N
IMANIE S WIJAYARATNE
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 271-0260
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

TROYER, EMILY
Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
678 3RD AVE
CHULA VISTA, CA 91910
Phone: (619) 662-4100
Fax: (619) 425-1184
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

EL CAJON

ARAIZA, ERNESTINA
Provider Gender: Female
License Number: PSY32549
NPI: 1568608636
Provider English Spoken: Y
Cultural Competency: N
ERNESTINA ARAIZA
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ARNOLD, REBECCA
Provider Gender: Female
License Number: MFC95778
NPI: 1225580350
Provider English Spoken: Y
Cultural Competency: N
REBECCA L ARNOLD
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-0251
Fax: (858) 633-4692
After Hours Phone: (619) 440-0251
D6. 心理健康名錄

Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CASEY, SHANNON
Provider Gender: Female
License Number: PSY31889
NPI: 1548873755
Provider English Spoken: Y
Cultural Competency: N
SHANNON K CASEY
215 W MADISON AVE
EL CAJON, CA 92020
Phone: (619) 667-6125
Fax: (619) 590-9036
After Hours Phone: (619) 667-6125
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DIA, ALI
Provider Gender: Male
License Number: A47803
NPI: 1912031030
Provider English Spoken: Y
Arabic
Cultural Competency: N
ALI R DIA
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GUARDADO-SOTO, RAQUEL
Provider Gender: Female
License Number: PSY26883
NPI: 1194999276
Provider English Spoken: Y
Cultural Competency: N
RAQUEL GUARDADO-SOTO
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (858) 633-4692
After Hours Phone: (619) 440-2751
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
D6. 心理健康名錄

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

KOH, STEVE
Provider Gender: Male
License Number: A103468
NPI: 1467650473
Provider English Spoken: Y
Korean
Cultural Competency: N

STEVE H KOH
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ORLANDO, FRANCESCA
Provider Gender: Female
License Number: LCS107210
NPI: 1275097081
Provider English Spoken: Y
Cultural Competency: N

FRANCESCA A ORLANDO
215 W MADISON AVE
EL CAJON, CA 92020
Phone: (619) 401-6236
Fax: (619) 590-9036
After Hours Phone: (619) 401-6236
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MAXWELL, MELISSA
Provider Gender: Female
License Number: LCS90791
NPI: 1275182826
Provider English Spoken: Y
Cultural Competency: N

MELISSA K MAXWELL
215 W MADISON AVE
EL CAJON, CA 92020
Phone: (619) 667-6125
Fax: (619) 590-9036
After Hours Phone: (619) 667-6125
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

POSTLETHWAITE, ALEJANDRA
Provider Gender: Female
License Number: A88938
NPI: 1750566915
Provider English Spoken: Y
Cultural Competency: N

ALEJANDRA POSTLETHWAITE
855 E MADISON AVE
EL CAJON, CA 92020
Phone: (619) 440-2751
Fax: (858) 633-4692
After Hours Phone: (619) 440-2751
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

WEAVER, AMANDA
Provider Gender: Female
License Number: MFC105361
NPI: 1174266423
Provider English Spoken: Y
Cultural Competency: N

AMANDA R WEAVER
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

D6. 心理健康名錄

WHEELER, KIM
Provider Gender: Female
License Number: PSY34237
NPI: 1700577434
Provider English Spoken: Y
Cultural Competency: N
KIM N WHEELER
875 EL CAJON BLVD
EL CAJON, CA 92020
Phone: (619) 662-4100
Fax: (619) 785-3356
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

GOMEZ, JUANITA
Provider Gender: Female
License Number: PSY27439
NPI: 1790915759
Provider English Spoken: Y
Cultural Competency: N
JUANITA GOMEZ
1505 ENCINITAS BLVD
ENCINITAS, CA 92024
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

JOANNA M LOPEZ
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ESCONDIDO

ARLINGHAUS, RENE
Provider Gender: Female
License Number: LCS80909
NPI: 1568973964
Provider English Spoken: Y
Cultural Competency: N
RENE M ARLINGHAUS
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GARCIA, ROSEMARIE
Provider Gender: Female
License Number: MFC123590
NPI: 1710410980
Provider English Spoken: Y
Cultural Competency: N
ROSEMARIE C GARCIA
1130 2ND ST
ENCINITAS, CA 92024
Phone: (760) 736-6767
Fax: (760) 736-6740
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
D6. 心理健康名錄

PROVIDER

Hours: M-T 8:00AM-5:00PM

BECERRA, GABRIEL
Provider Gender: Male
License Number: LCS114743
NPI: 1205313319
Provider English Spoken: Y Spanish
Cultural Competency: N
GABRIEL CELESTINO BECERRA
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BELINSKY, MARIA
Provider Gender: Female
License Number: LCS69175
NPI: 1760867824
Provider English Spoken: Y Spanish
Cultural Competency: N
MARIA T BELINSKY
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BELINSKY, MARIA
Provider Gender: Female
License Number: LCS69175
NPI: 1760867824
Provider English Spoken: Y Spanish
Cultural Competency: N
MARIA T BELINSKY
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (858) 633-4693
After Hours Phone: (760) 520-8100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CARLTON PENN, CORNELIA
Provider Gender: Female
License Number: PSY14310
NPI: 1891720611
Provider English Spoken: Y German
Cultural Competency: N
CORNELIA J CARLTON-PENN
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CASTILLO, TIFFANY
Provider Gender: Female
License Number: A158480
NPI: 1114459252
Provider English Spoken: Y
Spanish
Cultural Competency: N
TIFFANY A CASTILLO
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

CHRISTENSEN, PATTI
Provider Gender: Female
License Number: LCS24129
NPI: 1245434745
Provider English Spoken: Y
Cultural Competency: N
PATTI J CHRISTENSEN
1002 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 741-2660
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ESTRADA PATINO, ANGELA
Provider Gender: Female
License Number: PSY31789
NPI: 1629339015
Provider English Spoken: Y
Spanish
Cultural Competency: N
ANGELA J ESTRADA PATINO
460 N ELM ST
ESCONDIDO, CA 92025
Phone: (760) 520-8100
Fax: (760) 466-1373
After Hours Phone: (760)
520-8100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 14\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 8:00AM-0:00PM

FU, KATHERINE
Provider Gender: Female
License Number: A187562
NPI: 1356877807
Provider English Spoken: Y
Cultural Competency: N
KATHERINE FU
704 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

GUZZO, RICHARD
Provider Gender: Male
License Number: LCS8288
NPI: 1497898431
Provider English Spoken: Y
Cultural Competency: N
RICHARD L GUZZO
1002 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 737-6960
After Hours Phone: (760) 737-6960
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:30AM-5:00PM

HARRIS, LAURA
Provider Gender: Female
License Number: LCS18214
NPI: 1255640280
Provider English Spoken: Y
Cultural Competency: N
LAURA S HARRIS
1002 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 741-2660
Fax: (760) 741-2647
After Hours Phone: (760) 741-2660
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

KULKARNI, NISHAT
Provider Gender: Male
License Number: LCS818270
NPI: 1669034321
Provider English Spoken: Y
Cultural Competency: N
NISHAT KULKARNI
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

MAGOS, DANIEL
Provider Gender: Male
License Number: LCS88270
NPI: 1578983664
Provider English Spoken: Y
Cultural Competency: N
DANIEL K MAGOS
D6. 心理健康名錄

POSTLETHWAITE, ALEJANDRA
Provider Gender: Female
License Number: A88938
NPI: 1750566915
Provider English Spoken: Y
Cultural Competency: N
ALEJANDRA POSTLETHWAITE
425 N DATE ST
ESCONDIDO, CA 92025
☎ Phone: (760) 520-8300
☎ After Hours Phone: (760) 520-8300
☎ Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

PRASAD, AMITHA
Provider Gender: Female
License Number: A158657
NPI: 1821436882
Provider English Spoken: Y
Cultural Competency: N
AMITHA PRASAD
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
☎ Phone: (760) 294-9270
☎ Fax: (760) 294-9268
☎ After Hours Phone: (760) 294-9270
☎ Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

RIOS, SIERRA
Provider Gender: Female
License Number: LCS91970
NPI: 1942746128
Provider English Spoken: Y
Spanish
Cultural Competency: N
D6. 心理健康名錄

SIERRA K RIOS
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 7:00AM-7:30PM
TU 7:00AM-4:30PM
W 7:00AM-7:30PM
TH-F 7:00AM-4:30PM

RODARTE, GABRIEL
Provider Gender: Male
License Number: A87906
NPI: 1184649212
Provider English Spoken: Y
Spanish
Cultural Competency: N
GABRIEL RODARTE
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (858) 633-4698
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

STOCK, CALVIN
Provider Gender: Male
License Number: 20A18127
NPI: 1275995870
Provider English Spoken: Y
Cultural Competency: N
CALVIN T STONE
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

ROBLEDIO, DAMIAN
Provider Gender: Male
License Number: LCS66152
NPI: 1376831289
Provider English Spoken: Y
Spanish
Cultural Competency: N
DAMIAN ROBLEDIO
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

STREET, KYLE
Provider Gender: Male
License Number: 20A21304
NPI: 1457912131
Provider English Spoken: Y
Cultural Competency: N
KYLE A STREE
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SUOZZO, JOSEPH

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D6. 心理健康名錄

Provider Gender: Male
License Number: PSY18393
NPI: 1821013228
Provider English Spoken: Y
Cultural Competency: N
JOSEPH M SUOZZO

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (858) 633-4698
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Accessibility: CONTACT PROVIDER

TEETER-WITT, ALYSSA
Provider Gender: Female
License Number: PSY31075
NPI: 1932308442
Provider English Spoken: Y
Cultural Competency: N
ALYSSA TEETER-WITT

426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
Fax: (858) 633-4693
After Hours Phone: (760) 690-5900
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

THOMAS, PAULA
Provider Gender: Female
License Number: LCS29517
NPI: 1821389966
Provider English Spoken: Y
Cultural Competency: N
PAULA M THOMAS

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TIZNADO, MONICA
Provider Gender: Female
License Number: MFC81074
NPI: 1497895197
Provider English Spoken: Y
Spanish
Cultural Competency: N
MONICA M TIZNADO

425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
D6. 心理健康名錄

NPI: 1497895197
Provider English Spoken: Y
Spanish
Cultural Competency: N
MONICA M TIZNADO
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (360) 462-2752
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

VALLEZ-BARLAM, ANDREA
Provider Gender: Female
License Number: PSY9962
NPI: 1710902143
Provider English Spoken: Y
German, Spanish
Cultural Competency: N
ANDREA VALLEZ-BARLAM
426 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 690-5900
Fax: (858) 633-4693
After Hours Phone: (760) 690-5900
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

VAQUERO, JUANA
Provider Gender: Female
License Number: PSY28364
NPI: 1023459708
Provider English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

WOODWORTH, JENNIFER
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8300
Fax: (858) 633-4698
After Hours Phone: (760) 520-8300
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
D6. 心理健康名錄

Provider Gender: Female
License Number: PSY26963
NPI: 1639362494

JENNIFER WOODWORTH
425 N DATE ST
ESCONDIDO, CA 92025
Phone: (760) 520-8340
Fax: (858) 633-4698
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Spanish
Cultural Competency: N
Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

GILROY, LAURA
Provider Gender: Female
License Number: LCS27123
NPI: 1437427978
Provider English Spoken: Y
Cultural Competency: N
LAURA L GILROY
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760) 451-4720
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MAGEE, ANNA
Provider Gender: Female
License Number: LCS107407
NPI: 1194234609
Provider English Spoken: Y
Cultural Competency: N
ANNA M MAGEE
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760) 451-4720
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Cultural Competency: N
Accessibility: CONTACT PROVIDER

MCAULEY, ROBERT
Provider Gender: Male
License Number: G23317
NPI: 1194881888
Provider English Spoken: Y
Cultural Competency: N
ROBERT A MCAULEY
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4730
Fax: (760) 457-4700
After Hours Phone: (760) 451-4730
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 12\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MILES, RENEE
Provider Gender: Female
License Number: LCS70204
NPI: 1053763623

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
D6. 心理健康名錄

Provider English Spoken: Y
Cultural Competency: N

RENEE S MILES
1328 S MISSION RD
FALLBROOK, CA 92028
Phone: (760) 451-4720
Fax: (760) 457-4700
After Hours Phone: (760) 451-4720
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: N

RODARTE, GABRIEL
Provider Gender: Male
License Number: A87906
NPI: 1184649212
Provider English Spoken: Y
Spanish
Cultural Competency: N

Gonzalez, Claudia
Provider Gender: Female
License Number: LCS100328
NPI: 1770055543
Provider English Spoken: Y
Cultural Competency: N

CLAUDIA GONZALEZ
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ZUREK, BEDEANIA
Provider Gender: Female
License Number: LCS74215
NPI: 1942375811
Provider English Spoken: Y
Cultural Competency: N

BEDEANIA R ZUREK
949 PALM AVE
IMPERIAL BEACH, CA 91932
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

JESSICA R BAILIS
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHRISTOPHER R BOOTH
9300 CAMPUS POINT DR
2273
D6. 心理健康名錄

LA JOLLA, CA 92037
/provider information/
Provider Gender: Male
License Number: PSY21823
NPI: 1780620906
Provider English Spoken: Y
Cultural Competency: N
KERRI N BOUTELLE
/office information/
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

BOUTELLE, KERRI
Provider Gender: Male
License Number: PSY21823
NPI: 1780620906
Provider English Spoken: Y
Cultural Competency: N
KERRI N BOUTELLE
Office Information:
3344 N TORREY PINES CT
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BRAR, SIMERJEET
Provider Gender: Female
License Number: A144765
NPI: 1417393307
Provider English Spoken: Y
Cultural Competency: N
SIMERJEET K BRAR
/office information/
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
D6. 心理健康名錄

- **After Hours Phone:** (800) 926-8273
- **Website:** N/A
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **TDD:** U
- **Min/Max Age:** 0\1999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**CHESHER, NICHOLAS**
- **Provider Gender:** Male
- **License Number:** PSY29290
- **NPI:** 1124539697
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **KIMBERLY B CHESHER**
  - **Address:** 9300 CAMPUS POINT DR, LA JOLLA, CA 92037
  - **Phone:** (800) 926-8273
  - **Fax:** (888) 539-8781
  - **After Hours Phone:** (800) 926-8273
  - **Website:** N/A
  - **Accepting New Patients:** Yes
  - **Site English Spoken:** Y
  - **TDD:** U
  - **Min/Max Age:** 0\1999
  - **American Sign Language (ASL):** N
  - **Accessibility:** CONTACT PROVIDER
  - **Hours:** M-F 8:00AM-5:00PM

**CRANDAL, BRENT**
- **Provider Gender:** Male
- **License Number:** PSY26294
- **NPI:** 1588739452
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **BRENT R CRANDAL**
  - **Address:** 8950 VILLA LA JOLLA DR, STE C101, LA JOLLA, CA 92037
  - **Phone:** (800) 926-8372
  - **Fax:** (888) 539-8781
  - **After Hours Phone:** (800) 926-8372
  - **Website:** N/A
  - **Accepting New Patients:** Yes
  - **Site English Spoken:** Y
  - **TDD:** U
  - **Min/Max Age:** 0\1999
  - **American Sign Language (ASL):** N
  - **Accessibility:** CONTACT PROVIDER
  - **Hours:** M-F 8:00AM-5:00PM

**DUARTE, KRISTEN**
- **Provider Gender:** Female
- **License Number:** PSY31227
- **NPI:** 1093119364
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **KRISTEN L DUARTE**
  - **Address:** 9300 CAMPUS POINT DR, LA JOLLA, CA 92037
  - **Phone:** (800) 926-8273
  - **Fax:** (888) 539-8781
  - **After Hours Phone:** (800) 926-8273
  - **Website:** N/A
  - **Accepting New Patients:** Yes
  - **Site English Spoken:** Y
  - **TDD:** U
  - **Min/Max Age:** 0\1999
  - **American Sign Language (ASL):** N
  - **Accessibility:** CONTACT PROVIDER
  - **Hours:** M-F 8:00AM-5:00PM

**DUARTE, KRISTEN**
- **Provider Gender:** Female
- **License Number:** PSY31227
- **NPI:** 1093119364
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **KRISTEN L DUARTE**
  - **Address:** 8950 VILLA LA JOLLA DR, STE C101, LA JOLLA, CA 92037
  - **Phone:** (800) 926-8273
  - **Fax:** (888) 539-8781
  - **After Hours Phone:** (800) 926-8273
  - **Website:** N/A
  - **Accepting New Patients:** Yes
  - **Site English Spoken:** Y
  - **TDD:** U
  - **Min/Max Age:** 0\1999
  - **American Sign Language (ASL):** N
  - **Accessibility:** CONTACT PROVIDER
  - **Hours:** M-F 8:00AM-5:00PM
D6. 心理健康名錄

Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

EICHEN, DAWN
Provider Gender: Female
License Number: PSY27823
NPI: 1861043366
Provider English Spoken: Y
Cultural Competency: N
DAWN M EICHEN
3344 N TORREY PINES CT
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

EICHEN, DAWN
Provider Gender: Female
License Number: PSY27823
NPI: 1861043366
Provider English Spoken: Y
Cultural Competency: N
DAWN M EICHEN
8950 VILLA LA JOLLA DR
STE C212
LA JOLLA, CA 92037
Phone: (858) 246-1654
Fax: (858) 246-3181
After Hours Phone: (858) 246-1654
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ELLEDGE, LINDSAY
Provider Gender: Female
License Number: LCS96136
NPI: 1619428828
Provider English Spoken: Y
Cultural Competency: N
LINDSAY E ELLEDGE
8950 VILLA LA JOLLA DR
STE 101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FINN, DAPHNA
Provider Gender: Female
License Number: A152291
NPI: 1639522725
Provider English Spoken: Y
Cultural Competency: N
DAPHNA M FINN
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

8:00AM-5:00PM
D6. 心理健康名錄

- Site English Spoken: Y
  TDD: U
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F
  8:00AM-5:00PM

HUEGE, STEVEN
Provider Gender: Male
License Number: C141122
NPI: 1598716367
Provider English Spoken: Y
Cultural Competency: N

STEVEN F HUEGE
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Website: N/A
- Accepting New Patients: Yes
  Site English Spoken: Y
  TDD: U
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F
  8:00AM-5:00PM

KHAFAJA, MOHAMAD
Provider Gender: Male
License Number: A115892
NPI: 1780867119
Provider English Spoken: Y
Arabic
Cultural Competency: N
MOHAMAD H KHAFAJA
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Website: N/A
- Accepting New Patients: Yes
  Site English Spoken: Y
  TDD: U
  Min/Max Age: 0\999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-F
  8:00AM-5:00PM

LEDBETTER, ALEX
Provider Gender: Male
License Number: 20A20454
NPI: 1073017315
Provider English Spoken: Y
Cultural Competency: N
ALEX W LEDBETTER
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273

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D6. 心理健康名錄

Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LEE, DAVID
Provider Gender: Male
License Number: A124329
NPI: 1871884130
Provider English Spoken: Y
Korean
Cultural Competency: N
DAVID J LEE
9350 CAMPUS POINT DR
STE LLB
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

LI, XIA
Provider Gender: Female
License Number: A163344
NPI: 1336670413
Provider English Spoken: Y
Mandarin
Cultural Competency: N
XIA LI
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

LINKE, SARAH
Provider Gender: Female
License Number: PSY27116
NPI: 1487026415
Provider English Spoken: Y
Cultural Competency: N
SARAH E LINKE
8939 VILLA LA JOLLA DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (619) 471-9017
After Hours Phone: (858) 534-7792
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

MAGINOT-CHESHER, TAMARA
Provider Gender: Female
License Number: PSY28678
NPI: 1043441165
Provider English Spoken: Y
Cultural Competency: N
TAMARA R MAGINOT
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (858) 534-7792
Fax: (619) 471-9017
After Hours Phone: (858) 534-7792
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

MAXWELL, BENJAMIN
Provider Gender: Male
License Number: A108124
NPI: 1740415926
Provider English Spoken: Y
Cultural Competency: N
BENJAMIN K MAXWELL
Phone: (858) 534-8019
Fax: (858) 534-6727
After Hours Phone: (858) 534-8019
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\150
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

MENDEZ, ANDRES
Provider Gender: Male
License Number: PSY28907
NPI: 1841482692
Provider English Spoken: Y
Spanish
Cultural Competency: N
ANDRES G MENDEZ
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

MOORE, SHAVON
Provider Gender: Female
License Number: A152789
NPI: 1053682773
Provider English Spoken: Y
Cultural Competency: N
SHAVON C MOORE
9300 CAMPUS POINT DR
LA JOLLA, CA 92037
Phone: (800) 826-8273
Fax: (888) 539-8781
After Hours Phone: (800) 826-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG
Provider Gender: Male
License Number: G83977
NPI: 1720011620
Provider English Spoken: Y
Vietnamese
Cultural Competency: N
D6. 心理健康名錄

**HOANG A NGUYEN**

- **Address:** 9300 CAMPUS POINT DR, LA JOLLA, CA 92037
- **Phone:** (619) 497-6673
- **After Hours Phone:** (619) 497-6673
- **Website:** N/A
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **TDD:** U
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**QAYOUMI, WALI**

- **Provider Gender:** Male
- **License Number:** A168429
- **NPI:** 1093178220
- **Provider English Spoken:** Y French
- **Cultural Competency:** N
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**NGUYEN, HOANG**

- **Provider Gender:** Male
- **License Number:** G83977
- **NPI:** 1720011620
- **Provider English Spoken:** Y Vietnamese
- **Cultural Competency:** N
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**QAYOUMI, WALI**

- **Address:** 9350 CAMPUS POINT DR, STE LLB, LA JOLLA, CA 92037
- **Phone:** (619) 284-3746
- **Fax:** (888) 579-8781
- **After Hours Phone:** (619) 284-3746
- **Website:** N/A
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y French
- **TDD:** U
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**REED, KRISTIE**

- **Provider Gender:** Female
- **License Number:** PSY30934
- **NPI:** 1679869556
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**QAYOUMI, WALI**

- **Address:** 9500 GILMAN DR STE 2069, LA JOLLA, CA 92037
- **Phone:** (858) 822-5881
- **Fax:** (888) 539-8781
- **After Hours Phone:** (858) 822-5881
- **Website:** N/A
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y French
- **TDD:** U
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**REED, KRISTIE**

- **Provider Gender:** Female
- **License Number:** PSY30934
- **NPI:** 1679869556

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2280
D6. 心理健康名錄

Provider English Spoken: Y
Cultural Competency: N

KRISTIE L REED
3344 N TORREY PINES CT
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: N

RICHARD, MARLA
Provider English Spoken: Y
Cultural Competency: N

MARLA G RICHARD
9300 MEDICAL CENTER DR
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: N

TARLE, STEPHANIE
Provider English Spoken: Y
Cultural Competency: N

TARVER, LESLIE
Provider English Spoken: Y
Cultural Competency: N

8:00AM-5:00PM

RICHARD, MARLA
Provider Gender: Female
License Number: G65188
NPI: 1578720934

MARLA G RICHARD
8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: N

TARLE, STEPHANIE
Provider Gender: Female
License Number: PSY32155
NPI: 1659920403

TARVER, LESLIE
Provider Gender: Female
License Number: A169181
NPI: 1811300957

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: N

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: N

Accessibility: CONTACT PROVIDER

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: N

Accessibility: CONTACT PROVIDER

8950 VILLA LA JOLLA DR
STE C101
LA JOLLA, CA 92037
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: N

Accessibility: CONTACT PROVIDER

2281
D6. 心理健康名錄

LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
☎ After Hours Phone: (800) 926-8273
.Unmarshal<Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

WISHNEK, HANNAH
Provider Gender: Female
License Number: LCS105699
NPI: 1578012043
Provider English Spoken: Y
Cultural Competency: N
HANNAH K WISHNEK
8910 VILLA LA JOLLA DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
☎ After Hours Phone: (800) 926-8273
.Unmarshal<Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ZLATAR, ZVINKA
Provider Gender: Female
License Number: PSY26230
NPI: 1497139059
Provider English Spoken: Y
Spanish
Cultural Competency: N
ZVINKA Z ZLATAR
9444 MEDICAL CENTER DR
LA JOLLA, CA 92037
☎ Phone: (800) 926-8273
Fax: (888) 539-8781
☎ After Hours Phone: (800) 926-8273
.Unmarshal<Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LAKESIDE

BRUNETTO, HEIDI
Provider Gender: Female
License Number: PSY26809
NPI: 1023250453
Provider English Spoken: Y
Cultural Competency: N
HEIDI M BRUNETTO
10039 VINE ST
LAKESIDE, CA 92040
☎ Phone: (619) 390-9975
Fax: (858) 633-4690
☎ After Hours Phone: (619) 390-9975
.Unmarshal<Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

KUGEL, SAMUEL
Provider Gender: Male
License Number: A54412
NPI: 1497813968
Provider English Spoken: Y
Portuguese, Spanish
Cultural Competency: N

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-5:00PM

NATIONAL CITY

FLANIGAN, MARILYN
Provider Gender: Female
License Number: MFC97326
NPI: 1588996912
Provider English Spoken: Y
Cultural Competency: N
Marilyn Y Flanigan
2743 Highland Ave
National City, CA 91950
☎ Phone: (844) 200-2426
Fax: (858) 578-4417
☎ After Hours Phone: (844) 200-2426
Unmarshaller<Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-6:00PM

2282
D6. 心理健康名錄

SAMUEL KUGEL

 PROVIDER
 🔄 Hours: M-F
 🔄 8:30AM-5:30PM
 🔄 SA 8:00AM-2:30PM

SILVEY, CHRISTOPHER
Provider Gender: Male
License Number: LCS85942
NPI: 1932793502
Provider English Spoken: Y
Cultural Competency: N
CHRISTOPHER J SILVEY

 PROVIDER
 🔄 Hours: M-F
 🔄 8:00AM-5:00PM
 🔄 SA 9:00AM-4:00PM

SACHS, MELISSA
Provider Gender: Female
License Number: LCS76968
NPI: 1649760356
Provider English Spoken: Y
Cultural Competency: N
MELISSA R SACHS

 PROVIDER
 🔄 Hours: M-F
 🔄 9:00AM-5:00PM

ACOSTA, AZUCENA
Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Spanish
Cultural Competency: N
AZUCENA ACOSTA

 PROVIDER
 🔄 Hours: M-F
 🔄 8:00AM-5:00PM

ACOSTA, AZUCENA
Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Spanish
Cultural Competency: N
AZUCENA ACOSTA

 PROVIDER
 🔄 Hours: M-F
 🔄 8:00AM-5:00PM

OCEANSIDE

ACOSTA, AZUCENA
Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Spanish
Cultural Competency: N
AZUCENA ACOSTA

 PROVIDER
 🔄 Hours: M-F
 🔄 8:00AM-5:00PM
D6. 心理健康名錄

ACOSTA, AZUCENA
Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Spanish
Cultural Competency: N
AZUCENA ACOSTA
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHALMERS, VIRGINIA
Provider Gender: Female
License Number: LCS28053
NPI: 1265613715
Provider English Spoken: Y
Spanish
Cultural Competency: N
VIRGINIA C CHALMERS
619 CROUCH ST
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 566-1501

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Spanish
Cultural Competency: N
CHALMERS, VIRGINIA
Provider Gender: Female
License Number: LCS28053
NPI: 1265613715
Provider English Spoken: Y
Spanish
Cultural Competency: N
D6. 心理健康名錄

- Site English Spoken: Y
  TDD: U
  Min/Max Age: 0/999
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Hours: M-TH
  8:00AM-7:00PM
  F 8:00AM-5:00PM
  SA 9:00AM-4:00PM

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Spanish
Cultural Competency: N

WARREN R CHRISTIANSON II
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0/999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Spanish
Cultural Competency: N

WARREN R CHRISTIANSON II
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0/999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

COOK, SHERYL
Provider Gender: Female
License Number: PSY15449
NPI: 1750420816
Provider English Spoken: Y
Cultural Competency: N
SHERYL G COOK
619 CROUCH ST STE 100
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0/999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M 9:00AM-6:15PM
W 9:00AM-6:00PM

CRUZ, VANESSA
Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
D6. 心理健康名錄

**Cultural Competency: N**

**VANESSA Y CRUZ**

- **818 PIER VIEW WAY**
  - **OCEANSIDE, CA 92054**
  - **Phone:** (760) 631-5000
  - **Fax:** (760) 414-3892
  - **After Hours Phone:** (760) 631-5000
  - **Website:** N/A
  - **Accepting New Patients:** Yes
  - **Site English Spoken:** Yes
  - **TDD:** U
  - **Min/Max Age:** 0\999
  - **American Sign Language (ASL):** N

  **Accessibility:** CONTACT PROVIDER

- **Hours:** M-TH
  - 9:00AM-7:00PM
  - F 9:00AM-5:00PM
  - SA 9:00AM-4:00PM

**CRUZ, VANESSA**

- **Provider Gender:** Female
- **License Number:** LCS87166
- **NPI:** 1285170662
- **Provider English Spoken:** Y
- **Cultural Competency:** N
- **Site English Spoken:** Yes
- **TDD:** U
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N

  **Accessibility:** CONTACT PROVIDER

**DOUGHERTY, CHRISTINE**

- **Provider Gender:** Female
- **License Number:** LCS26686
- **NPI:** 1003194960
- **Provider English Spoken:** Yes
- **Cultural Competency:** N
- **Site English Spoken:** Yes
- **TDD:** U
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N

  **Accessibility:** CONTACT PROVIDER
D6. 心理健康名錄

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<th>电话</th>
<th>传真</th>
<th>應急電話</th>
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<th>專業類別</th>
<th>年齡限制</th>
<th>美國手語</th>
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<td>818 PIER VIEW WAY OCEANSIDE, CA 92054</td>
<td>(760) 631-5000</td>
<td>(760) 414-3892</td>
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<tr>
<td>DOUGHERTY, CHRISTINE</td>
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<td>LCS26686</td>
<td>1003194960</td>
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<td>Y</td>
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<tr>
<td>JENSEN, BRIAN</td>
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<td>PSY26041</td>
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<tr>
<td>MAUHILI, KENNA</td>
<td>Female</td>
<td>PSY23713</td>
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<td>CONTACT PROVIDER</td>
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<tr>
<td>MENDEZ, ADRIANA</td>
<td>Female</td>
<td>LCS86435</td>
<td>1356777361</td>
<td>Y</td>
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<td>N</td>
<td>0-999</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
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您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。

如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D6. 心理健康名錄

- **Site English Spoken:** Y
  
  **TDD:** U
  
  **Min/Max Age:** 0\999
  
  **American Sign Language (ASL):** N
  
  **Accessibility:** CONTACT PROVIDER

**MENDEZ, ADRIANA**

- **Provider Gender:** Female
- **License Number:** LCS86435
- **NPI:** 1356777361
- **Provider English Spoken:** Y
  
  **Spanish
  
  **Cultural Competency:** N
  
  **ADRIANA J MENDEZ**
  
  - **Address:** 818 PIER VIEW WAY
    
    - **City:** OCEANSIDE
    
    - **State:** CA
    
    - **Zip:** 92054
    
  - **Phone:** (760) 631-5000
    
    - **Fax:** (760) 414-3892
    
    - **After Hours Phone:** (760) 631-5000
    
  - **Website:** N/A
  
  **Accepting New Patients:** Yes
  
  **Site English Spoken:** Y
  
  **TDD:** U
  
  **Min/Max Age:** 0\999
  
  **American Sign Language (ASL):** N
  
  **Accessibility:** CONTACT PROVIDER

**MEYERHOF, GRETA**

- **Provider Gender:** Female
- **License Number:** MFC32299
- **NPI:** 1487196333
- **Provider English Spoken:** Y
  
  **Cultural Competency:** N
  
  **GRETA R MEYERHOF**
  
  - **Address:** 4700 N RIVER RD
    
    - **City:** OCEANSIDE
    
    - **State:** CA
    
    - **Zip:** 92054
    
  - **Phone:** (760) 631-5000
    
    - **Fax:** (760) 414-3892
    
    - **After Hours Phone:** (760) 631-5000
    
  - **Website:** N/A
  
  **Accepting New Patients:** Yes
  
  **Site English Spoken:** Y
  
  **TDD:** U
  
  **Min/Max Age:** 0\999
  
  **American Sign Language (ASL):** N
  
  **Accessibility:** CONTACT PROVIDER

**MEYERHOF, GRETA**

- **Provider Gender:** Female
- **License Number:** MFC32299
- **NPI:** 1487196333
- **Provider English Spoken:** Y
  
  **Cultural Competency:** N
  
  **GRETA R MEYERHOF**
  
  - **Address:** 517 N HORNE ST
    
    - **City:** OCEANSIDE
    
    - **State:** CA
    
    - **Zip:** 92054
    
  - **Phone:** (760) 631-5000
    
    - **Fax:** (760) 414-3892
    
    - **After Hours Phone:** (760) 631-5000
    
  - **Website:** N/A
  
  **Accepting New Patients:** Yes
  
  **Site English Spoken:** Y
  
  **TDD:** U
  
  **Min/Max Age:** 0\999
  
  **American Sign Language (ASL):** N
  
  **Accessibility:** CONTACT PROVIDER
D6. 心理健康名錄

MONTEZ, REBECCA
Provider Gender: Female
License Number: LCS26869
NPI: 1396047809
Provider English Spoken: Y
Spanish
Cultural Competency: N
REBECCA MONTEZ
2210 MESA DR STE 5
OCEANSIDE, CA 92054
Phone: (760) 757-5841
Fax: (619) 736-8740
After Hours Phone: (760) 757-5841
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEVILLE, MARGARET
Provider Gender: Female
License Number: LCS82407
NPI: 1073682407
Provider English Spoken: Y
Cultural Competency: N
MARGARET R NEVILLE
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEVILLE, MARGARET
Provider Gender: Female
License Number: LCS82407
NPI: 1073682407
Provider English Spoken: Y
Cultural Competency: N
MARGARET R NEVILLE
818 PIER VIEW WAY
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEVILLE, MARGARET
Provider Gender: Female
License Number: LCS82407
NPI: 1073682407
Provider English Spoken: Y
Cultural Competency: N
MARGARET R NEVILLE
4700 N RIVER RD
OCEANSIDE, CA 92057
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ORTIZ, BEVERLY
Provider Gender: Female
License Number: MFC121355
NPI: 1760826572
Provider English Spoken: Y
Cultural Competency: N
BEVERLY L ORTIZ
2210 MESA DR STE 300
OCEANSIDE, CA 92054
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

PATEL, MITESH
Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATEL

D6. 心理健康名錄

PATIEL, MITESH
Provider Gender: Male
License Number: A181164
NPI: 1568880292
Provider English Spoken: Y
Cultural Competency: N
MITESH K PATIEL
Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM

SANCHEZ, ADRIANA
Provider Gender: Female
License Number: LCS97093
NPI: 1609450451
Provider English Spoken: Y
Spanish
Cultural Competency: N
ADRIANA SANCHEZ
Hours: M 8:00AM-5:00PM
TU 10:00AM-7:00PM
W-F 8:00AM-5:00PM
SA 9:00AM-4:00PM
D6. 心理健康名錄

NPI: 1609450451
Provider English Spoken: Y
Spanish
Cultural Competency: N
ADRIANA SANCHEZ
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SMITH, SONYA
Provider Gender: Female
License Number: LCS82598
NPI: 1902070857
Provider English Spoken: Y
Spanish
Cultural Competency: N
SONYA L SMITH
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

WILSON, CARLENE
Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
Provider English Spoken: Y
Cultural Competency: N
CARLENE WILSON
517 N HORNE ST
OCEANSIDE, CA 92054
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D6. 心理健康名錄

**CARLENE WILSON**
- Location: 818 PIER VIEW WAY
- OCEANSIDE, CA 92054
- Phone: (760) 631-5000
- Fax: (760) 414-3892
- After Hours Phone: (760) 631-5000
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**WILSON, CARLENE**
- Location: 4700 N RIVER RD
- OCEANSIDE, CA 92057
- Phone: (760) 631-5000
- Fax: (760) 414-3892
- After Hours Phone: (760) 631-5000
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**KULKARNI, NISHAT**
- Provider Gender: Male
- License Number: A187134
- NPI: 1669034732
- Provider English Spoken: Y
- Cultural Competency: N
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
- TDD: U
- Hours: M-F 8:00AM-5:00PM

**MODHWADIA, MAMTA**
- Provider Gender: Female
- License Number: A113990
- NPI: 1043353667
- Provider English Spoken: Y
- German
- Cultural Competency: N
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Hours: M-F 8:00AM-5:00PM

**POSTLETHWAITE, ALEJANDRA**
- Provider Gender: Female
- License Number: A88938
- NPI: 1750566915
- Provider English Spoken: Y
- Cultural Competency: N
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Hours: M-F 8:00AM-5:00PM

**STREET, KYLE**
- Provider Gender: Male
- License Number: 20A21304
- NPI: 1457912131
- Provider English Spoken: Y
D6. 心理健康名錄

**Cultural Competency: N**

**KYLE A STREET**

13010 POWAY RD
POWAY, CA 92064

- Phone: (858) 218-3000
- Fax: (360) 462-2742
- After Hours Phone: (858) 218-3000

- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish

- Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 9:00AM-5:00PM

**SAN DIEGO**

**ABERCROMBIE, SHERI**

Provider Gender: Female
License Number: PSY18536
NPI: 1932292422

- Provider English Spoken: Y
- Cultural Competency: N

- Hours: M-F
  - 9:00AM-5:00PM

**VALLEZ-BARLAM, ANDREA**

Provider Gender: Female
License Number: PSY9962
NPI: 1710902143

- Provider English Spoken: Y
- German, Spanish

- Cultural Competency: N

**ANDREA VALLEZ-BARLAM**

13010 POWAY RD
POWAY, CA 92064

- Phone: (858) 218-3000
- Fax: (858) 633-4688
- After Hours Phone: (858) 218-3000

- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y

**SHERI ABERCROMBIE**

7011 LINDA VISTA RD
SAN DIEGO, CA 92111

- Phone: (858) 810-8787
- Fax: (858) 987-5825
- After Hours Phone: (858) 810-8787

- Website: N/A
- Accepting New Patients: Yes

**ABERCROMBIE, SHERI**

Provider Gender: Female
License Number: PSY18536
NPI: 1932292422

- Provider English Spoken: Y
- Cultural Competency: N

**TRACY S ARONLEE**

6973 LINDA VISTA RD
SAN DIEGO, CA 92111

- Phone: (858) 279-0925
- Fax: (858) 633-4680
- After Hours Phone: (858) 279-0925

- Website: N/A
- Accepting New Patients: Yes

**ARONLEE, TRACY**

Provider Gender: Female
License Number: LCS83778
NPI: 1619304748

- Provider English Spoken: Y
- Cultural Competency: N

- Hours: M-F
  - 8:30AM-5:30PM
  - SA 8:30AM-4:00PM

**ABERCROMBIE, SHERI**

Provider Gender: Female
License Number: PSY18536
NPI: 1932292422

- Provider English Spoken: Y
- Cultural Competency: N
D6. 心理健康名錄

ARONLEE, TRACY
Provider Gender: Female
License Number: LCS83778
NPI: 1619304748
Provider English Spoken: Y
Cultural Competency: N
TRACY S ARONLEE
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

BANKS, SARAH
Provider Gender: Female
License Number: PSY30296
NPI: 1164701132
Provider English Spoken: Y
Cultural Competency: N
SARAH J BANKS
200 W ARBOR FL 1
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

BARRON, KAVITA
Provider Gender: Female
License Number: A155596
NPI: 1821418542
Provider English Spoken: Y
Cultural Competency: N
KAVITA BARRON
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

BASS, GURGIANA
Provider Gender: Male
License Number: PSY24750
NPI: 1639325277
Provider English Spoken: Y
Cultural Competency: N

2294
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<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Website</th>
<th>Accepting New Patients</th>
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<tr>
<td>GURGIANA BASS</td>
<td>7011 LINDA VISTA RD</td>
<td>(858) 810-8787</td>
<td>(858) 987-5825</td>
<td>(858) 810-8787</td>
<td>N/A</td>
<td>Yes</td>
<td>Y</td>
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<tr>
<td>BRAR, SIMERJEET</td>
<td>3020 CHILDRENS WAY</td>
<td>(858) 576-1700</td>
<td>(858) 966-8164</td>
<td>(858) 576-1700</td>
<td>N/A</td>
<td>Yes</td>
<td>Y</td>
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<td>CONTACT</td>
<td></td>
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<tr>
<td>BREEDLOVE, AMANDA</td>
<td>1666 PRECISION PARK LN</td>
<td>(619) 662-4100</td>
<td>(619) 785-3384</td>
<td>(619) 662-4100</td>
<td>N/A</td>
<td>Yes</td>
<td>Y</td>
<td></td>
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<tr>
<td>CALLAGHAN, KATHRYN</td>
<td>2630 1ST AVE</td>
<td>(619) 234-2158</td>
<td>(619) 234-0206</td>
<td>(619) 234-2158</td>
<td>N/A</td>
<td>Yes</td>
<td>Y</td>
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<tr>
<td>BROWN, DARCIE</td>
<td>16950 VIA TAZON</td>
<td>(800) 926-8273</td>
<td>(888) 539-8781</td>
<td>(800) 926-8273</td>
<td>N/A</td>
<td>Yes</td>
<td>Y</td>
<td></td>
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<td>CONTACT</td>
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<tr>
<td>CEBALLOS, JACQUELINE CAMILLE</td>
<td></td>
<td>(619) 234-2158</td>
<td>(619) 234-0206</td>
<td>(619) 234-2158</td>
<td>N/A</td>
<td>Yes</td>
<td>Y</td>
<td></td>
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<td>CONTACT</td>
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</table>
您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D6. 心理健康名錄

License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 576-1700
Fax: (858) 966-8164
After Hours Phone: (858) 576-1700
Website: N/A
Accepting New Patients: Yes

CLEMENT, LUIS
Provider Gender: Male
License Number: PSY28534
NPI: 1235364712
Provider English Spoken: Y
Cultural Competency: N
LUIS F CLEMENT
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes

CIOBANU, COSMINA
Provider Gender: Female
License Number: A137628
NPI: 1285049932
Provider English Spoken: Y
Cultural Competency: N
COSMINA S CIOBANU
8001 FROST ST
SAN DIEGO, CA 92123
Phone: (858) 576-1700
Fax: (858) 966-8164
After Hours Phone: (858) 576-1700
Website: N/A
Accepting New Patients: Yes

CRISOL, CAROLINE
Provider Gender: Female
License Number: MFC88616
NPI: 1962663617
Provider English Spoken: Y
Spanish
Cultural Competency: N
CAROLINE M CRISOL LMFT INC
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 205-1952
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes

DEACON, CASSIE
Provider Gender: Female
License Number: LCS94105
NPI: 1720452998
Provider English Spoken: Y
Cultural Competency: N
CASSIE C DEACON
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes

Min/Max Age: 0\19
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER

Min/Max Age: 0\999
American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
DEACON, CASSIE
Provider Gender: Female
License Number: LCS94105
NPI: 1720452998
Provider English Spoken: Y
Cultural Competency: N
CASSIE C DEACON
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DIAZ, JAENAI
Provider Gender: Female
License Number: LCS80689
NPI: 1508241811
Provider English Spoken: Y
Spanish
Cultural Competency: N
JAENAI DIAZ
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DEL AGUILA, FABIOLA
Provider Gender: Female
License Number: PSY24471
NPI: 1720283211
Provider English Spoken: Y
Spanish
Cultural Competency: N
FABIOLA DEL AGUILA
1016 OUTER RD
SAN DIEGO, CA 92154
Phone: (619) 429-3733
Fax: (619) 628-5550
After Hours Phone: (619) 429-3733
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DIOKNO, RHODA
Provider Gender: Female
License Number: PSY28073
NPI: 1629109483
Provider English Spoken: Y
Cultural Competency: N
RHODA CARINO DIOKNO
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

DOLNAN, DOUGLAS
Provider Gender: Male
License Number: 20A6059
NPI: 1316147085
Provider English Spoken: Y
Cultural Competency: N
DOUGLAS R DOLNAN
10737 CAMINO RUIZ
SAN DIEGO, CA 92126
Phone: (844) 200-2426
Fax: (619) 474-4008
After Hours Phone: (844) 200-2426
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Hours: M-F 8:00AM-6:00PM
D6. 心理健康名錄

DOSS, KATIE
Provider Gender: Female
License Number: LCS112693
NPI: 1134825979
Provider English Spoken: Y
Cultural Competency: N
KATIE L DOSS
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

DSOUZA, NICOLE
Provider Gender: Male
License Number: LCS101958
NPI: 1225462799
Provider English Spoken: Y
Cultural Competency: N
NICOLE A DSOUZA
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ANASTASIE M DUNN-PIRIO
200 W ARBOR DR FL 1
SAN DIEGO, CA 92103
Phone: (619) 543-3500
Fax: (888) 539-8781
After Hours Phone: (619) 543-3500
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

ESTAVILLO, SAUL
Provider Gender: Male
License Number: MFC102610
NPI: 1528330073
Provider English Spoken: Y
Spanish
Cultural Competency: N
SAUL J ESTAVILLO
286 EUCLID AVE STE 309
SAN DIEGO, CA 92114
Phone: (619) 527-7390
Fax: (619) 527-7390
After Hours Phone: (619) 527-7390
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

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D6. 心理健康名錄

ESTAVILLO, SAUL
Provider Gender: Male
License Number: MFC102610
NPI: 1528330073
Provider English Spoken: Y
Spanish
Cultural Competency: N
SAUL J ESTAVILLO
3045 BEYER BLVD STE D101
SAN DIEGO, CA 92154
Phone: (619) 662-4161
Fax: (619) 662-4109
After Hours Phone: (619) 662-4161
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FIRESTONE, MICHELLE
Provider Gender: Female
License Number: PSY33081
NPI: 1114687803
Provider English Spoken: Y
Cultural Competency: N
MICHELLE E FIRESTONE
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FITZGERALD, MICHAEL
Provider Gender: Male
License Number: A73710
NPI: 1336393578
Provider English Spoken: Y
Cultural Competency: N
MICHAEL W FITZGERALD
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
FORZANI, CHRISTINA
Provider Gender: Female
License Number: PSY25710
NPI: 1902939630
Provider English Spoken: Y
Cultural Competency: N
CHRISTINA A FORZANI
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 961-1497
Fax: (858) 633-4682
After Hours Phone: (619) 961-1497
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

FRY, LIANE
Provider Gender: Female
License Number: MFC42570
NPI: 1003110917
Provider English Spoken: Y
Cultural Competency: N
LIANE M FRY
3177 OCEAN VIEW BLVD
SAN DIEGO, CA 92113
Phone: (619) 662-4100
Fax: (619) 595-0258
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-4:30PM

GARCIA, JENNI
Provider Gender: Female
License Number: LPCC10346
NPI: 1437775863
Provider English Spoken: Y
Spanish
Cultural Competency: N
JENNI GARCIA
3025 BEYER BLVD
SAN DIEGO, CA 92154
Phone: (619) 662-4100
Fax: (619) 662-4119
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GARCIA, RICHARD
Provider Gender: Male
License Number: LCS28742
NPI: 1881198554
Provider English Spoken: Y
Cultural Competency: N
RICHARD R GARCIA
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

GIAMONA, KRISTEN
Provider Gender: Female
License Number: PSY28419
NPI: 1376824383
Provider English Spoken: Y
Cultural Competency: N
KRISTEN M GIAMONA
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GOMEZ, JUANITA
Provider Gender: Female
License Number: PSY27439
NPI: 1790915759
Provider English Spoken: Y
Cultural Competency: N
JUANITA GOMEZ
6030 VILLAGE WAY
SAN DIEGO, CA 92130
Phone: (800) 926-8372
Fax: (888) 539-8781
After Hours Phone: (800) 926-8372
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GIAMONA, KRISTEN
Provider Gender: Female
License Number: PSY28419
NPI: 1376824383
Provider English Spoken: Y
Cultural Competency: N
KRISTEN M GIAMONA
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8787
Fax: (858) 987-5825
After Hours Phone: (858) 810-8787
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GULOTTA, SAMANTHA
Provider Gender: Female
License Number: MFC134199
NPI: 1790407732
Provider English Spoken: Y
Cultural Competency: N
SAMANTHA L GULOTTA
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

HERNANDEZ, SILVIA
Provider Gender: Female
License Number: MFC51787
NPI: 1982821179
Provider English Spoken: Y
Cultural Competency: N
SILVIA E HERNANDEZ
3025 BEYER BLVD
SAN DIEGO, CA 92154
Phone: (760) 520-8340
Fax: (619) 662-4119
After Hours Phone: (760) 520-8340
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

JOSHI, YASH
Provider Gender: Male
License Number: A147156
NPI: 1598151433
Provider English Spoken: Y
Cultural Competency: N
D6. 心理健康名錄

YASH B JOSHI
- 200 W ARBOR DR
- SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM

KHAF AJA, MOHAMAD
- Provider Gender: Male
- License Number: A115892
- NPI: 1780867119
- Provider English Spoken: Y
- Arabic
- Cultural Competency: N
- MOHAMAD H KHAF AJA
- 200 W ARBOR DR
- SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM

KAYE, WALTER
- Provider Gender: Male
- License Number: A24819
- NPI: 1922076223
- Provider English Spoken: Y
- Cultural Competency: N
- WALTER H KAYE
- 4510 EXECUTIVE DR
- SAN DIEGO, CA 92121
- Phone: (858) 534-8019
- After Hours Phone: (858) 534-8019
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM

KHAMISA, SORAIYA
- Provider Gender: Female
- License Number: LCS81951
- NPI: 1811254386
- Provider English Spoken: Y
- Cultural Competency: N
- SORAIYA N KHAMISA
- 4520 EXECUTIVE DR STE A
- SAN DIEGO, CA 92121
- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM

KLUEMPER, NICOLE
- Provider Gender: Female
- License Number: PSY27064
- NPI: 1902125818
- Provider English Spoken: Y
- Cultural Competency: N
- NICOLE S KLUEMPER
- 6973 LINDA VISTA RD
- SAN DIEGO, CA 92111
- Phone: (858) 279-0925
- Fax: (858) 633-4680
- After Hours Phone: (858) 279-0925
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
- Hours: M-F
  - 8:00AM-5:00PM

KLUEMPER, NICOLE
- Provider Gender: Female
- License Number: PSY27064
- NPI: 1902125818
- Provider English Spoken: Y
- Cultural Competency: N
- NICOLE S KLUEMPER
- 7011 LINDA VISTA RD
- SAN DIEGO, CA 92111
- Phone: (858) 810-8700
- Fax: (858) 279-0377
- After Hours Phone: (858)
D6. 健康名錄

810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LABIB, MICHAEL
Provider Gender: Male
License Number: PSY34180
NPI: 1609055797
Provider English Spoken: Y
Arabic
Cultural Competency: N
MICHAEL LABIB
1666 PRECISION PARK LN
SAN DIEGO, CA 92173
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LEBENSOHN CHIALVO, FLORENCIA
Provider Gender: Female
License Number: PSY30776
NPI: 1134788730
Provider English Spoken: Y
Cultural Competency: N
FLORENCIA LEBENSOHN CHIALVO
9333 GENESEE AVE STE 200
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

LEDBETTER, ALEX
Provider Gender: Male
License Number: 20A20454
NPI: 1073017315
Provider English Spoken: Y
Cultural Competency: N
ALEX W LEDBETTER
6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

Your PCP’s office may have their own networked mental health providers. Please see the list below. You may contact these providers directly. Please note some services may require mental health providers to obtain Blue Shield prior authorization before they can be covered.

For a list of mental health service providers online, please visit blueshieldca.com/fad.
**D6. 心理健康名錄**

*926-8273*
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

**LEE, DAVID**
- Provider Gender: Male
- License Number: A124329
- NPI: 1871884130
- Provider English Spoken: Y
- Korean
- Cultural Competency: N
- DAVID J LEE
- 200 W ARBOR DR FL 1
  SAN DIEGO, CA 92103
- Phone: (800) 926-8273
- After Hours Phone: (800) 926-8273
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM

**LI, XIA**
- Provider Gender: Female
- License Number: A163344
- NPI: 1336670413
- Provider English Spoken: Y
- Mandarin
- Cultural Competency: N
- XIA LI
- 16918 DOVE CANYON RD
  STE 100
  SAN DIEGO, CA 92127
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM

**LINKE, SARAH**
- Provider Gender: Female
- License Number: PSY27116
- NPI: 1487026415
- Provider English Spoken: Y
- Cultural Competency: N
- SARAH E LINKE
- 9909 MIRA MESA BLVD
  STE 200
  SAN DIEGO, CA 92131
- Phone: (800) 926-8273
- Fax: (888) 539-8781
- After Hours Phone: (800) 926-8273
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Y
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F
  8:00AM-5:00PM

**LIU, TIMOTHY**
- Provider Gender: Male
- License Number: A105535
- NPI: 1720262801
- Provider English Spoken: Y
- Mandarin, Yue Chinese
- Cultural Competency: N
- TIMOTHY C LIU
- 6973 LINDA VISTA RD
  SAN DIEGO, CA 92111
D6. 心理健康名錄

LIU, TIMOTHY
Provider Gender: Male
License Number: A105535
NPI: 1720262801
Provider English Spoken: Y
Mandarin, Yue Chinese
Cultural Competency: N
TIMOTHY C LIU
7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 279-0377
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MALAK, LAWRENCE
Provider Gender: Male
License Number: A115345
NPI: 1467773028
Provider English Spoken: Y
Cultural Competency: N
LAWRENCE T MALAK
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (658) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 14\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

MAGINOT-CHESHER, TAMARA
Provider Gender: Female
License Number: PSY28678
NPI: 1043441165
Provider English Spoken: Y
Cultural Competency: N
TAMARA R MAGINOT
CHESHER
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (858) 534-8019
Fax: (858) 534-6727
After Hours Phone: (858) 534-8019
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 8:00AM-2:00PM

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
4290 POLK AVE
SAN DIEGO, CA 92105
D6. 心理健康名錄

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

MARTINEZ, STEPHANIE
Provider Gender: Female
License Number: A152787
NPI: 1699126367
Provider English Spoken: Y
Spanish
Cultural Competency: N
STEPHANIE MARTINEZ
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MCCULLUM, TIFFANY
Provider Gender: Female
License Number: PSY29329
NPI: 1528306206
Provider English Spoken: Y
Spanish
Cultural Competency: N
TIFFANY MCCULLUM
286 EUCLID AVE STE 302
SAN DIEGO, CA 92114
Phone: (619) 662-4100
Fax: (619) 205-1949
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

MILLS, BRAD
Provider Gender: Male
License Number: LCS87409
NPI: 1598542813
Provider English Spoken: Y
Spanish
Cultural Competency: N
BRAD A MILLS
1501 IMPERIAL AVE
SAN DIEGO, CA 92101
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

MIRON, JEAN-PHILIPPE
Provider Gender: Male
License Number: A186033
NPI: 1952178196
Provider English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D6. 心理健康名錄

Cultural Competency: N
JEAN-PHILIPPE MIRON
16918 DOVE CANYON RD
STE 100
SAN DIEGO, CA 92127
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MOORE, SHAVON
Provider Gender: Female
License Number: A152789
NPI: 1053682773
Provider English Spoken: Y
Cultural Competency: N
SHAVON C MOORE
4510 EXECUTIVE DR
SAN DIEGO, CA 92121
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

MUHAMMAD, LAMA
Provider Gender: Female
License Number: A156500
NPI: 1558701623
Provider English Spoken: Y
Arabic
Cultural Competency: N
LAMA MUHAMMAD
200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

NAKAMURA, TIFFANY
Provider Gender: Female
License Number: LPCC4383
NPI: 1356846349
Provider English Spoken: Y
Cultural Competency: N

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D6. 心理健康名錄

TIFFANY NAKAMURA

4510 EXECUTIVE DR STE 315
SAN DIEGO, CA 92121
Phone: (858) 534-8019
After Hours Phone: (858) 534-8019
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

NGUYEN, HOANG

Provider Gender: Male
License Number: G83977
NPI: 1720011620
Provider English Spoken: Y
Vietnamese
Cultural Competency: N
HOANG A NGUYEN

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

NING, GRACE

Provider Gender: Female
License Number: PSY27293
NPI: 1598911315
Provider English Spoken: Y
Chinese, Mandarin
Cultural Competency: N
GRACE J NING

7011 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 810-8700
Fax: (858) 633-4680
After Hours Phone: (858) 810-8700
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NORMAN, MARC

Provider Gender: Male
License Number: PSY16278
NPI: 1922169101
Provider English Spoken: Y
Cultural Competency: N
MARC A NORMAN

200 W ARBOR DR
D6. 心理健康名錄

SAN DIEGO, CA 92103
Phone: (619) 543-2827
After Hours Phone: (619) 543-2827
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

NORMAN, MARC
Provider Gender: Male
License Number: PSY16278
NPI: 1922169101
Provider English Spoken: Y
Cultural Competency: N
MARC A NORMAN
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

OJHA, PRITI
Provider Gender: Female
License Number: A139807
NPI: 1760897284
Provider English Spoken: Y
Cultural Competency: N
PRITI OJHA
350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

ORFF, HENRY
Provider Gender: Male
License Number: PSY27099
NPI: 1144685215
Provider English Spoken: Y
Cultural Competency: N
HENRY J ORFF
4520 EXECUTIVE DR STE P2
SAN DIEGO, CA 92121
Phone: (844) 757-5337
Fax: (844) 757-5337
After Hours Phone: (844) 757-5337
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

ORTIZ, MARIA
Provider Gender: Female
License Number: PSY30953
NPI: 1497980775
Provider English Spoken: Y
Spanish
Cultural Competency: N
MARIA E ORTIZ
950 S EUCLID AVE
SAN DIEGO, CA 92114
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
D6. 心理健康名錄

PATTON, MICHAEL
Provider Gender: Male
License Number: LCS18244
NPI: 1184756702
Provider English Spoken: Y
Cultural Competency: N
MICHAEL A PATTON
Phone: (619) 662-4100
Fax: (619) 662-4158
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-6:00PM

QAYOUMI, WALI
Provider Gender: Male
License Number: A168429
NPI: 1093178220
Provider English Spoken: Y
French
Cultural Competency: N
WALI Z QAYOUMI
Phone: (619) 294-3746
Fax: (888) 539-8781
After Hours Phone: (619) 294-3746
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

RADOJEVIC, NATASHA
Provider Gender: Female
License Number: PSY28495
NPI: 1821365008
Provider English Spoken: Y
Cultural Competency: N
NATASHA RADOJEVIC
Phone: (619) 233-8500
Fax: (619) 687-1067
After Hours Phone: (619) 233-8500
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
D6. 心理健康名錄

RICHARD, MARLA
Provider Gender: Female
License Number: G65188
NPI: 1578720934
Provider English Spoken: Y
Cultural Competency: N
MARLA G RICHARD

200 W ARBOR DR
SAN DIEGO, CA 92103
Phone: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

SACHS, MELISSA
Provider Gender: Female
License Number: LCS76968
NPI: 1649760356
Provider English Spoken: Y
Cultural Competency: N
MELISSA R SACHS

4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

SAWYER, CAROLYN
Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER

3030 CHILDRENS WAY FL 4
SAN DIEGO, CA 92123
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
D6. 心理健康名錄

SAWYER, CAROLYN
Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
3665 KEARNY VILLA RD
STE 400
SAN DIEGO, CA 92123
Phone: (858) 966-5990
Fax: (858) 966-7508
After Hours Phone: (858) 966-5990
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

SAWYER, CAROLYN
Provider Gender: Female
License Number: A149116
NPI: 1043653249
Provider English Spoken: Y
Cultural Competency: N
CAROLYN M SAWYER
7920 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 246-0794
Fax: (858) 496-9257
After Hours Phone: (858) 246-0794
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

SCHELLINGER, KRISTON
Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (858) 246-1979
Fax: (858) 246-1979
After Hours Phone: (858) 246-1979
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

SCHELLINGER, KRISTON
Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
330 LEWIS ST
SAN DIEGO, CA 92103
Phone: (858) 966-6227
Fax: (858) 966-4032
After Hours Phone: (858) 966-4032
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

SCHELLINGER, KRISTON
Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
9333 GENESEE AVE STE
200
SAN DIEGO, CA 92131
Phone: (800) 926-8273
Fax: (800) 926-8273
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

SCHELLINGER, KRISTON
Provider Gender: Female
License Number: PSY26313
NPI: 1710234273
Provider English Spoken: Y
Cultural Competency: N
KRISTON B SCHELLINGER
9909 MIRA MESA BLVD
STE 200
SAN DIEGO, CA 92131
Phone: (858) 246-1979
Fax: (858) 246-1979
After Hours Phone: (858) 246-1979
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D6. 心理健康名錄

**SCHLOSSER, TARA**
Provider Gender: Female  
License Number: MFC107868  
NPI: 1407220437  
Provider English Spoken: Y  
Cultural Competency: N  
TARA S SCHLOSSER  
330 LEWIS ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM

**SERIO, TAYLOR**
Provider Gender: Female  
License Number: LCS107050  
NPI: 1093217382  
Provider English Spoken: Y  
Cultural Competency: N  
TAYLOR L SERIO  
6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 279-0925  
Fax: (858) 633-4680  
After Hours Phone: (858) 279-0925  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM

**SHU, I WEI**
Provider Gender: Male  
License Number: A103813  
NPI: 1992840144  
Provider English Spoken: Y  
Cultural Competency: N  
I WEI SHU  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (858) 534-6200  
Fax: (858) 633-4680  
After Hours Phone: (800) 926-8273  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F  
8:00AM-5:00PM

**SILVEY, CHRISTOPHER**
Provider Gender: Male  
License Number: LCS85942  
NPI: 1932793502  
Provider English Spoken: Y  
Cultural Competency: N  
CHRISTOPHER J SILVEY  
10737 CAMINO RUIZ STE 235  
SAN DIEGO, CA 92126  
Phone: (858) 578-4220  
Fax: (858) 578-4417  
After Hours Phone: (858) 578-4220
D6. 心理健康名錄

🌐 Website: N/A
 Locke New Patients: Yes

icism Spoken: Y

TDD: U

Min/Max Age: 0\999

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

SOLORIO JR, ROBERTO
Provider Gender: Male
License Number: LCS102729
NPI: 1972088185
Provider English Spoken: Y
Cultural Competency: N
ROBERTO SOLORIO JR

4690 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 662-4100
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SWEIGERT, JAMIE
Provider Gender: Female
License Number: LCS112304
NPI: 1396353595
Provider English Spoken: Y
Cultural Competency: N
JAMIE L SWEIGERT

2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SUAREZ, ROBERTO
Provider Gender: Male
License Number: MFC25098
NPI: 1386785160
Provider English Spoken: Y
Cultural Competency: N
ROBERTO SUAREZ

3025 BEYER BLVD
SAN DIEGO, CA 92154
Phone: (619) 662-4100
Fax: (619) 662-4119
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TARLE, STEPHANIE
Provider Gender: Female
License Number: PSY32155
NPI: 1659920403
Provider English Spoken: Y
Cultural Competency: N
STEPHANIE J TARLE

6655 ALVARADO RD
SAN DIEGO, CA 92120
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

THIESSEN, KAREN
Provider Gender: Female
License Number: MFC52523
NPI: 1184798241
Provider English Spoken: Y
Cultural Competency: N
KAREN A THIESSEN

350 DICKINSON ST
SAN DIEGO, CA 92103
Phone: (800) 926-8273
Fax: (888) 539-8781
After Hours Phone: (800) 926-8273
Website: N/A
Accepting New Patients: Yes

Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

TILTON, PETER
Provider Gender: Male
License Number: G27781
NPI: 1538258694
Provider English Spoken: Y
Cultural Competency: N

PETER A TILTON
2630 1ST AVE
SAN DIEGO, CA 92103
Phone: (619) 234-2158
Fax: (619) 234-0505
After Hours Phone: (619) 234-2158
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TO, TUAN
Provider Gender: Male
License Number: PSY30204
NPI: 1255696183
Provider English Spoken: Y
Cultural Competency: N

TUAN TO
6973 LINDA VISTA RD
SAN DIEGO, CA 92111
Phone: (858) 279-0925
Fax: (858) 633-4680
After Hours Phone: (858) 279-0925
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TROYER, EMILY
Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N

EMILY A TROYER
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D6. 心理健康名錄

TROYER, EMILY
Provider Gender: Female
License Number: A149101
NPI: 1326484437
Provider English Spoken: Y
Cultural Competency: N
EMILY A TROYER
4290 POLK AVE
SAN DIEGO, CA 92105
Phone: (619) 563-0250
Fax: (858) 633-4681
After Hours Phone: (619) 563-0250
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 18\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

VIERLING, SABRINA
Provider Gender: Female
License Number: PSY26117
NPI: 1215288238
Provider English Spoken: Y
Cultural Competency: N
SABRINA C VIERLING
4305 UNIVERSITY AVE STE 150
SAN DIEGO, CA 92105
Phone: (619) 280-2058
Fax: (858) 633-4682
After Hours Phone: (619) 280-2058
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM

WU, MICHELLE
Provider Gender: Female
License Number: A125139
NPI: 1043650088
Provider English Spoken: Y
Cultural Competency: N
MICHELLE L WU
3020 CHILDRENS WAY
SAN DIEGO, CA 92123
Phone: (858) 966-8145
Fax: (858) 966-8164
After Hours Phone: (858) 966-8145
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\19
American Sign Language (ASL): N
| Name            | Gender | License Number | NPI     | English Spoken | Spanish       | Cultural Competency | Address                      | Phone               | Fax                  | Hours                        | After Hours Phone | Website | Accepting New Patients | Languages(s) Spoken | TDD | Min/Max Age | American Sign Language (ASL) | Accessibility | Provider English Spoken | Cultural Competency |
|-----------------|--------|----------------|---------|----------------|---------------|-------------------|----------------------|-------------------------|---------------------|--------------------------|-------------------|---------|------------------------|-------------------|------|--------------|-----------------------------|------------------)|--------------------------|---------------------|
| YAGUDAYEVA, RAISA | Female | 20A14848       | 1942555990 | Y             | Russian       | N                 | 200 W ARBOR DR      | (800) 926-8273         | (888) 539-8781      | M-F 8:00AM-5:00PM       | (800) 926-8273   | N/A     | Yes                    | N                 | U   |              |                             | CONTACT         | Y                        | N                   |
| ZAYAS, MARIO     | Male   | MFC111273      | 1275943557 | Y             | Spanish       | N                 | 3025 BEYER BLVD STE | (619) 662-4100         | (619) 428-5535      | M-F 8:00AM-5:00PM       | (619) 662-4100   | N/A     | Yes                    | Spanish           | U   |              |                             | CONTACT         | Y                        | N                   |
| ZIMMERMAN, JENNIFER | Female | LCS28729      | 1811449077 | Y             | Spanish       | N                 | 6973 LINDA VISTA RD | (858) 810-8700         | (858) 633-4680      | M-F 8:00AM-5:00PM       | (858) 810-8700   | N/A     | Yes                    | Spanish           | U   |              |                             | CONTACT         | Y                        | N                   |
| ZIMMERMAN, JENNIFER | Female | LCS28729      | 1811449077 | Y             | Spanish       | N                 | 6973 LINDA VISTA RD | (858) 279-9676         | (858) 633-4680      | M-F 8:00AM-5:00PM       | (858) 279-9676   | N/A     | Yes                    | Spanish           | U   |              |                             | CONTACT         | Y                        | N                   |
D6. 心理健康名錄

Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

SAN MARCOS

ALTAMIRANO, LEON
Provider Gender: Male
License Number: PSY23734
NPI: 1619271517
Provider English Spoken: Yes
Spanish
Cultural Competency: N
LEON ALTAMIRANO
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
  Phone: (760) 736-6767
  Fax: (760) 736-8740
- After Hours Phone: (760) 736-6767
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- TDD: U
- Min/Max Age: 5\50
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-F 8:00AM-5:00PM

CORTIZO, ROSA
Provider Gender: Female
License Number: PSY22278
NPI: 1952316648
Provider English Spoken: Yes
Spanish
Cultural Competency: N
ROSA CORTIZO
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
  Phone: (760) 736-6767
  Fax: (760) 736-8740
- After Hours Phone: (760) 736-6767
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Yes
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

ARIELLA, LYNDA
Provider Gender: Female
License Number: PSY19450
NPI: 1073518965
Provider English Spoken: Yes
Cultural Competency: N
LYNDA R ARIELLA
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
  Phone: (760) 736-6767
  Fax: (760) 736-8740
- After Hours Phone: (760) 736-6767
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Yes
- Site Languages(s) Spoken: Spanish
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

FLYNN, DANIELLE
Provider Gender: Female
License Number: PSY26184
NPI: 147785137
Provider English Spoken: Yes
Cultural Competency: N
DANIELLE I FLYNN
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
  Phone: (760) 736-6767
  Fax: (760) 736-8740
- After Hours Phone: (760) 736-6767
- Website: N/A
- Accepting New Patients: Yes
- Site English Spoken: Yes
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER

GEORGIEV, MARY JO
Provider Gender: Female
License Number: PSY17954
NPI: 1518996875
Provider English Spoken: Yes
Cultural Competency: N
MARY-JO GEORGIEV
- 150 VALPREDA RD
  SAN MARCOS, CA 92069
  Phone: (760) 736-6767
  Fax: (760) 736-8740
- After Hours Phone: (760) 736-6767
737-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

IMAM, SYED
Provider Gender: Male
License Number: PSY27695
NPI: 1447428271
Provider English Spoken: Y
Hindi
Cultural Competency: N
SYED IMAM
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-8:00PM
SA 8:00AM-5:00PM

REEG, JESSICA
Provider Gender: Female
License Number: MFC124306
NPI: 1144382987
Provider English Spoken: Y
Spanish
Cultural Competency: N
JESSICA REEG
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 566-1501
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SOLORIO JR, ROBERTO
Provider Gender: Male
License Number: LCS102729
NPI: 1972088185
Provider English Spoken: Y
Cultural Competency: N
ROBERTO SOLORIO JR
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

TONG, GARRICK
Provider Gender: Male
License Number: A102192
NPI: 1831361278
Provider English Spoken: Y
Cultural Competency: N
GARRICK G TONG
150 VALPREDA RD
SAN MARCOS, CA 92069
Phone: (760) 736-6767
Fax: (760) 736-8740
After Hours Phone: (760) 736-6767

**D6. 心理健康名錄**

- **Website:** N/A
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Site Languages(s) Spoken:** Spanish
- **TDD:** U
- **Min/Max Age:** 4\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-8:00PM
  SA 8:00AM-5:00PM

**TORRES, HECTOR**

- **Provider Gender:** Male
- **License Number:** PSY13309
- **NPI:** 1720265614
- **Provider English Spoken:** Y
  Spanish
- **Cultural Competency:** N
- **HECTOR M TORRES**
- **Address:** 150 VALPRED A RD
  SAN MARCOS, CA 92069
- **Phone:** (760) 736-6767
- **Fax:** (760) 736-8740
- **After Hours Phone:** (760) 736-6767
- **Website:** N/A
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **TDD:** U
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**CRAWFORD-DAY, ANN**

- **Provider Gender:** Female
- **License Number:** A166646
- **NPI:** 1386149706
- **Provider English Spoken:** Y
  Spanish
- **Cultural Competency:** N
- **ANN E CRAWFORD-DAY**
- **Address:** 4004 BEYER BLVD
  SAN YSIDRO, CA 92173
- **Phone:** (619) 662-6100
- **Fax:** (619) 205-6305
- **After Hours Phone:** (619) 662-4100
- **Website:** N/A
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Spanish
- **Cultural Competency:** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**DEPAOLO, AMANDA**

- **Provider Gender:** Female
- **License Number:** LCS99056
- **NPI:** 1215420138
- **Provider English Spoken:** Y
  Spanish
- **Cultural Competency:** N
- **AMANDA L DEPAOLO**
- **Address:** 4004 BEYER BLVD
  SAN YSIDRO, CA 92173
- **Phone:** (619) 662-4100
- **Fax:** (619) 205-6305
- **After Hours Phone:** (619) 662-4100
- **Website:** N/A
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Spanish
- **Cultural Competency:** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

**DIA, ALI**

- **Provider Gender:** Male
- **License Number:** A47803
- **NPI:** 1912031030
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Site Languages(s) Spoken:** Spanish
- **TDD:** U
- **Min/Max Age:** 0\999
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Hours:** M-F 8:00AM-5:00PM

---

**SAN YSIDRO**

**BALTRUS, JUSTINE**
D6. 心理健康名錄

Provider English Spoken: Y
Arabic
Cultural Competency: N
ALI R DIA

 vítro 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

GONZALEZ-GARCIA,
CAROLINA
Provider Gender: Female
License Number: MFC41111
NPI: 1215321955
Provider English Spoken: Y
Spanish
Cultural Competency: N
CAROLINA GONZALES GARCIA

 vítro 3364 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 565-2373
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

FONTANA, LOUIS
Provider Gender: Male
License Number: G49072
NPI: 1780734343
Provider English Spoken: Y
Cultural Competency: N
LOUIS A FONTANA

 vítro 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

JENNINGS, AMY
Provider Gender: Female
License Number: LCS100075
NPI: 1609549161
Provider English Spoken: Y
Cultural Competency: N
AMY E JENNINGS

 vítro 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

IBANEZ, BERENICE
Provider Gender: Female
License Number: PSY22080
NPI: 1740394386
Provider English Spoken: Y
Spanish
Cultural Competency: N
BERENICE B IBANEZ

 vítro 4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

您的
PCP
的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供
者。請注意,某些服務可能需要精神健康服務提供者獲得
Blue Shield
的事先授權,然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單,請造訪
blueshieldca.com/fad
。
JIMENEZ, NANCY
Provider Gender: Female
License Number: MFC141209
NPI: 1568023596
Provider English Spoken: Y
Cultural Competency: N
NANCY JIMENEZ
1666 PRECISION PARK LN
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 785-3384
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\64
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

LOPEZ, MARIBEL
Provider Gender: Female
License Number: LCS86171
NPI: 1669180600
Provider English Spoken: Y
Cultural Competency: N
MARIBEL, LOPEZ
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM

JOHNSON, JENNIFER
Provider Gender: Female
License Number: PSY33295
NPI: 1023783248
Provider English Spoken: Y
Cultural Competency: N
JENNIFER JOHNSON
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6341
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-8:00PM SA 8:00AM-2:00PM

MEAGHER, RAISHELLE
Provider Gender: Female
License Number: LCS109804
NPI: 1851821904
Provider English Spoken: Y
Cultural Competency: N
RAISHELLE L MEAGHER
120 TOWN CENTER PKWY
SANTEE, CA 92071
Phone: (619) 662-4100
Fax: (619) 662-4196
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: N
DENISE F MONTES
4004 BEYER BLVD
SAN YSIDRO, CA 92173
Phone: (619) 662-4100
Fax: (619) 205-6305
After Hours Phone: (619) 662-4100
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Hours: M-F 8:00AM-5:00PM
D6. 心理健康名錄

Min/Max Age: 0\999
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F
8:00AM-5:00PM

VALLEY CENTER

PLASCENCIA, CINDY
Provider Gender: Female
License Number: MFC113536
NPI: 1952737356
Provider English Spoken: Y
Cultural Competency: N
CINDY PLASCENCIA
28477 LIZARD ROCKS RD
VALLEY CENTER, CA 92082
Phone: (760) 742-9919
Fax: (360) 462-2750
After Hours Phone: (760) 742-9919
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

ACOSTA, AZUCENA
Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Spanish
Cultural Competency: N
AZUCENA ACOSTA
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Spanish
Cultural Competency: N
WARREN R CHRISTIANSON II
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

VISTA

ACOSTA, AZUCENA
Provider Gender: Female
License Number: LCS98304
NPI: 1255937496
Provider English Spoken: Y
Spanish
Cultural Competency: N
AZUCENA ACOSTA
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Spanish
Cultural Competency: N
D6. 心理健康名錄

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Spanish
Cultural Competency: N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CHRISTIANSON, WARREN
Provider Gender: Male
License Number: 20A9664
NPI: 1932359445
Provider English Spoken: Y
Spanish
Cultural Competency: N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA
Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
Accessibility: CONTACT PROVIDER
Hours: M-TU
8:00AM-8:00PM
W 9:00AM-7:00PM
TH 8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

CRUZ, VANESSA
Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
Accessibility: CONTACT PROVIDER
Hours: M-TH
8:00AM-7:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken:
Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N

2325
D6. 心理健康名錄

- Site Languages(s) Spoken: Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu
  TDD: U
  Min/Max Age: 4\999
  American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TU 8:00AM-8:00PM
  W 9:00AM-7:00PM
  TH 8:00AM-8:00PM
  F 8:00AM-5:00PM
  SA 9:00AM-4:00PM

CRUZ, VANESSA
Provider Gender: Female
License Number: LCS87166
NPI: 1285170662
Provider English Spoken: Y
Cultural Competency: N
VANESSA Y CRUZ
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu, Vietnamese, Tagalog
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TH 9:00AM-7:00PM
  F 9:00AM-5:00PM

DOUGHERTY, CHRISTINE
Provider Gender: Female
License Number: LCS26686
NPI: 1003194960
Provider English Spoken: Y
Cultural Competency: N
CHRISTINE A DOUGHERTY
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3891
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Telugu, Vietnamese, Tagalog
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TH 9:00AM-8:00PM
  F 9:00AM-5:00PM
  SA 9:00AM-4:00PM

Website: N/A
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog
- TDD: U
- Min/Max Age: 0\999
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Hours: M-TU 8:00AM-8:00PM
  W 9:00AM-7:00PM
  TH 8:00AM-8:00PM
  F 9:00AM-5:00PM
  SA 9:00AM-4:00PM
D6. 心理健康名錄

MENDEZ, ADRIANA
Provider Gender: Female
License Number: LCS86435
NPI: 1356777361
Provider English Spoken: Y
Spanish
Cultural Competency: N
ADRIANA J MENDEZ
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MEYERHOF, GRETA
Provider Gender: Female
License Number: MFC32299
NPI: 1487196333
Provider English Spoken: Y
Cultural Competency: N
GRETA R MEYERHOF
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

MENDEZ, ADRIANA
Provider Gender: Female
License Number: LCS86435
NPI: 1356777361
Provider English Spoken: Y
Spanish
Cultural Competency: N
ADRIANA J MENDEZ
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes

MEYERHOF, GRETA
Provider Gender: Female
License Number: MFC32299
NPI: 1487196333
Provider English Spoken: Y
Cultural Competency: N
GRETA R MEYERHOF
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

NEVILLE, MARGARET
Provider Gender: Female
License Number: LCS82407
NPI: 1073682407
Provider English Spoken: Y
Cultural Competency: N
MARGARET R NEVILLE
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): Arabic, Chinese, Lithuanian, Farsi, Spanish, Tagalog, Urdu, Vietnamese
TDD: U
Min/Max Age: 0\999
Accessibility: CONTACT PROVIDER
Hours: M-F
8:00AM-5:00PM
SA 8:00AM-4:00PM
D6. 心理健康名錄

NEVILLE, MARGARET  
Provider Gender: Female  
License Number: LCS82407  
NPI: 1073682407  
Provider English Spoken: Y  
Cultural Competency: N  
MARGARET R NEVILLE  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

PATEL, MITESH  
Provider Gender: Male  
License Number: A181164  
NPI: 1568880292  
Provider English Spoken: Y  
Cultural Competency: N  
MITESH K PATEL  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 18\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

SANCHEZ, ADRIANA  
Provider Gender: Female  
License Number: LCS97093  
NPI: 1609450451  
Provider English Spoken: Y  
Spanish  
Cultural Competency: N  
ADRIANA SANCHEZ  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\999  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER
D6. 心理健康名錄

SMITH, SONYA
Provider Gender: Female
License Number: LCS82598
NPI: 1902070857
Provider English Spoken: Y Spanish
Cultural Competency: N
SONYA L SMITH
134 GRAPEVINE RD
VISTA, CA 92083
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

WILSON, CARLENE
Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
Provider English Spoken: Y
Cultural Competency: N
CARLENE WILSON
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
Fax: (760) 414-3892
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Min/Max Age: 0\999
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

SMITH, SONYA
Provider Gender: Female
License Number: LCS82598
NPI: 1902070857
Provider English Spoken: Y Spanish
Cultural Competency: N
SONYA L SMITH
1000 VALE TERRACE DR
VISTA, CA 92084
Phone: (760) 631-5000
After Hours Phone: (760) 631-5000
Website: N/A
Accepting New Patients: Yes
Site English Spoken: Y
TDD: U
Hours: M-TH 8:00AM-8:00PM
F 8:00AM-5:00PM
SA 9:00AM-4:00PM

WILSON, CARLENE
Provider Gender: Female
License Number: LCS74685
NPI: 1508327081
Provider English Spoken: Y
Cultural Competency: N
CARLENE WILSON
ALPINE

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
☎ Phone: (619) 445-2687
Fax: (619) 445-0801
妤 After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
※ Site English Spoken: Y
American Sign Language (ASL): N
isks Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
僔 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
☎ Phone: (619) 445-2687
Fax: (619) 445-0801
妤 After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
※ Site English Spoken: Y
American Sign Language (ASL): N
isks Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
僔 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
☎ Phone: (619) 445-2687
Fax: (619) 445-0801
妤 After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
※ Site English Spoken: Y
American Sign Language (ASL): N
isks Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
僔 Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
☎ Phone: (619) 445-2687
Fax: (619) 445-0801
妤 After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
※ Site English Spoken: Y
D7. 視力提供者目錄 - 眼科和視力服務

American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Arabic
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Spanish
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

MARR, RYAN, OD
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

2331
D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
☎ Phone: (619) 445-2687
Fax: (619) 445-0801
致电時段: (619) 445-2687
接受新病人: 是
_site 英文: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Y
Gujarati, Hindi, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
☎ Phone: (619) 445-2687
Fax: (619) 445-0801
致电時段: (619) 445-2687
接受新病人: 是
_site 英文: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Indonesian, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
☎ Phone: (619) 445-2687
Fax: (619) 445-0801
致电時段: (619) 445-2687
接受新病人: 是
_site 英文: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

PRABHU, SUJATA, MD
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Spanish
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
☎ Phone: (619) 445-2687
Fax: (619) 445-0801
致电時段: (619) 445-2687
接受新病人: 是
_site 英文: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM
D7. 視力提供者目錄 - 眼科和視力服務

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

VIVIRITO, MARY, OD
Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Spanish
Cultural Competency: Y
WEST COAST EYE CARE
1620 ALPINE BLVD STE 117
ALPINE, CA 91901
Phone: (619) 445-2687
Fax: (619) 445-0801
After Hours Phone: (619) 445-2687
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
TU 10:00AM-6:00PM
W 9:00AM-5:00PM
TH 8:00AM-5:00PM
F 9:00AM-4:00PM

BONITA
CHA, DANIEL, OD
Provider Gender: Male
License Number: 14779
NPI: 1386078020
Provider English Spoken: Y
Spanish
Cultural Competency: Y
EYECARE OF BONITA
4502 BONITA RD
BONITA, CA 91902
Phone: (619) 479-7334
Fax: (619) 475-3456
After Hours Phone: (619) 479-7334
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: TU 9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 8:00AM-4:00PM

CARLSBAD
HO, TRAM, OD
Provider Gender: Female
License Number: 13485
NPI: 1245464460
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
EYE STYLE OPTOMETRY
5814 VAN ALLEN WAY STE 146
CARLSBAD, CA 92008
Phone: (760) 606-2020
After Hours Phone: (760) 606-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 8:00AM-6:30PM
W 8:00AM-6:00PM
TH 12:30AM-6:00PM
F 8:00AM-6:00PM
SA 9:00AM-2:00PM
<table>
<thead>
<tr>
<th>Name</th>
<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>English Spoken</th>
<th>French, Portuguese, Spanish, Tagalog</th>
<th>Cultural Competency</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Accepting New Patients</th>
<th>Site Languages(s) Spoken:</th>
<th>Accessibility</th>
<th>Public transportation (within 1/2 mile from Site)</th>
<th>Hours:</th>
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<tbody>
<tr>
<td>CASTILLEJOS, DAVID, MD</td>
<td>Male</td>
<td>A44482</td>
<td>1558446401</td>
<td></td>
<td></td>
<td></td>
<td>342 F ST CHULA VISTA, CA 91910</td>
<td>(619) 422-1471</td>
<td>(619) 271-7044</td>
<td>(619) 422-1471</td>
<td>Yes</td>
<td>French, Spanish, Tagalog</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>M-F 9:00AM-6:00PM</td>
</tr>
<tr>
<td>CHAIN, KWOK FUNG, OD</td>
<td>Male</td>
<td>35087</td>
<td>1407508385</td>
<td></td>
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<td>531 TELEGRAPH CANYON RD CHULA VISTA, CA 91910</td>
<td>(619) 482-2020</td>
<td>(619) 482-2671</td>
<td>(619) 482-2020</td>
<td>Yes</td>
<td>Arabic, Hindi, Spanish</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>SU 10:00AM-4:00PM</td>
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<tr>
<td>CASTILLEJOS, MARIA, MD</td>
<td>Female</td>
<td>A37652</td>
<td>1043395098</td>
<td></td>
<td></td>
<td></td>
<td>342 F ST CHULA VISTA, CA 91910</td>
<td>(619) 422-1471</td>
<td>(619) 271-7044</td>
<td>(619) 422-1471</td>
<td>Yes</td>
<td>French, Spanish, Tagalog</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>M-F 9:00AM-6:00PM</td>
</tr>
<tr>
<td>CASTILLEJOS EYE INSTITUTE MED GROUP</td>
<td>Male</td>
<td>A158446401</td>
<td>1558446401</td>
<td></td>
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<td>342 F ST CHULA VISTA, CA 91910</td>
<td>(619) 422-1471</td>
<td>(619) 271-7044</td>
<td>(619) 422-1471</td>
<td>Yes</td>
<td>French, Spanish, Tagalog</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>M-F 9:00AM-6:00PM</td>
</tr>
<tr>
<td>CHISHOLM, KAREN, OD</td>
<td>Male</td>
<td>35450</td>
<td>1568155190</td>
<td></td>
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<td></td>
<td>1741 EASTLAKE PKWY STE 101 CHULA VISTA, CA 91915</td>
<td>(619) 421-6600</td>
<td>(619) 421-6006</td>
<td>(619) 421-6600</td>
<td>Yes</td>
<td>Arabic, Hindi, Spanish</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>M-F 9:00AM-6:00PM</td>
</tr>
<tr>
<td>CHAN, KWOK FUNG, OD</td>
<td>Male</td>
<td>35087</td>
<td>1407508385</td>
<td></td>
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<td></td>
<td>531 TELEGRAPH CANYON RD CHULA VISTA, CA 91910</td>
<td>(619) 482-2020</td>
<td>(619) 482-2671</td>
<td>(619) 482-2020</td>
<td>Yes</td>
<td>Arabic, Hindi, Spanish</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>M-F 9:00AM-6:00PM</td>
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<tr>
<td>HUANG, PETER, OD</td>
<td>Male</td>
<td>11659</td>
<td>1639100522</td>
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<td></td>
<td>1741 EASTLAKE PKWY STE 101 CHULA VISTA, CA 91915</td>
<td>(619) 421-6600</td>
<td>(619) 421-6006</td>
<td>(619) 421-6600</td>
<td>Yes</td>
<td>Arabic, Hindi, Spanish</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>M-F 9:00AM-6:00PM</td>
</tr>
</tbody>
</table>
D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y
PETER D HUANG OD INC
557 H ST
CHULA VISTA, CA 91910
Phone: (619) 422-0139
Fax: (619) 422-0066
After Hours Phone: (619) 422-0139
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-5:00PM
   TU 9:00AM-6:00PM
   W 9:00AM-5:00PM
   TH 9:00AM-6:00PM
   F 8:00AM-4:00PM
   SA 9:00AM-2:00PM

KEDDINGTON, JOAN, OD
Provider Gender: Female
License Number: 6263
NPI: 1992872691
Provider English Spoken: Y
Spanish
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10:00AM-4:00PM
   M-F 9:00AM-7:00PM
   SA 9:00AM-5:00PM

KING, MARY, OD
Provider Gender: Female
License Number: 13711
NPI: 1578792107
Provider English Spoken: Y
Spanish
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10:00AM-4:00PM
   M-F 9:00AM-7:00PM
   SA 9:00AM-5:00PM

MASCARENO, EFRAIN, OD
Provider Gender: Male
License Number: 10906
NPI: 1457507279
Provider English Spoken: Y
Cultural Competency: Y
EASTLAKE VISION CENTER DR MASCARENO
2260 OTAY LAKES RD STE 111
D7. 視力提供者目錄 - 眼科和視力服務

CHULA VISTA, CA 91915

Phone: (619) 421-5550
Fax: (619) 421-6022
After Hours Phone: (619) 421-5550
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

NGUYEN, TRACY, OD
Provider Gender: Female
License Number: 10859
NPI: 1265596621
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
ESSENTIAL EYECARE OPTOMETRY
345 F ST STE 240
CHULA VISTA, CA 91910
Phone: (858) 467-0655
Fax: (619) 425-9797
After Hours Phone: (858) 467-0655
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

PLUCINIK, STANLEY, OD
Provider Gender: Male
License Number: 35255
NPI: 1124751417
Provider English Spoken: Y
Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone: (619) 422-1471
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER

D7. Visions Provider Directory - Eye Health and Vision Care

SCOVILL, ALEXANDRA, OD
Provider Gender: Female
License Number: 33711
NPI: 1184146094
Provider English Spoken: Y
Spanish
Cultural Competency: Y
CASTILLEJOS EYE INSTITUTE MED GROUP
342 F ST
CHULA VISTA, CA 91910
Phone: (619) 422-1471
Fax: (619) 271-7044
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 8:00AM-5:00PM
TU 7:00AM-5:00PM
W-F 8:00AM-5:00PM

SOLIS, KEVIN, OD
Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y
OTAY RANCH EYEWORKS OPTOMETRY
1741 EASTLAKE PKWY STE 101
CHULA VISTA, CA 91915
Phone: (619) 421-6600
Fax: (619) 421-6006
After Hours Phone: (619) 421-6600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: SU 10:00AM-4:00PM
M-F 9:00AM-7:00PM
SA 9:00AM-5:00PM

TOUBIA, ELIAS, OD
Provider Gender: Male
License Number: 33758
NPI: 1740701481
Provider English Spoken: Y
Arabic
Cultural Competency: Y
VILLA OPTOMETRY INC
531 TELEGRAPH CANYON RD
CHULA VISTA, CA 91910
Phone: (619) 482-2020
Fax: (619) 482-2671
After Hours Phone: (619) 482-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9:00AM-6:00PM

KATZMAN, LEE, MD
Provider Gender: Male
License Number: A135673
NPI: 1912297284
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

OU, JOCELYN, OD
Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

MANNEN, JOSEPH, OD
Provider Gender: Male
License Number: 33650
NPI: 1851827034
Provider English Spoken: Y
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

YOUNG, ALLA, OD
Provider Gender: Female
License Number: 34191
NPI: 1285085142
Provider English Spoken: Y
Russian
Cultural Competency: Y
ALVARADO EYE ASSOCIATES
MED CLINIC INC
801 ORANGE AVE STE 204
CORONADO, CA 92118
Phone: (619) 437-4406
Fax: (619) 522-7983
After Hours Phone: (619) 437-4406
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 9:00AM-4:30PM
TU 9:00AM-3:00PM
W-TH 9:00AM-4:30PM

EL CAJON

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
RETINA INSTITUTE OF
CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
D7. 視力提供者目錄 - 眼科和視力服務

ASIS, STEPHANIE, OD  
Provider Gender: Female  
License Number: 34013  
NPI: 1902383540  
Provider English Spoken: Y  
Cultural Competency: Y  
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP  
300 S PIERCE ST STE 200  
EL CAJON, CA 92020  
Phone: (619) 440-5400  
Fax: (619) 440-0239  
After Hours Phone: (619) 440-5400  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
8:30AM-6:00PM

BINDER, NICHOLAS, MD  
Provider Gender: Male  
License Number: A124698  
NPI: 1306076716  
Provider English Spoken: Y  
Cultural Competency: Y  
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP  
300 S PIERCE ST STE 200  
EL CAJON, CA 92020  
Phone: (619) 440-5400  
Fax: (619) 440-0239  
After Hours Phone: (619) 440-5400  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
8:30AM-6:00PM

BAUMANN, DANIELA, OD  
Provider Gender: Female  
License Number: 34530  
NPI: 198232146  
Provider English Spoken: Y  
Cultural Competency: Y  
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP  
300 S PIERCE ST STE 200  
EL CAJON, CA 92020  
Phone: (619) 440-5400  
Fax: (619) 440-0239  
After Hours Phone: (619) 440-5400  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
8:30AM-6:00PM

BUTLER, KIM, OD  
Provider Gender: Male  
License Number: 6405  
NPI: 1467444844  
Provider English Spoken: Y  
Cultural Competency: Y  
KIM J BUTLER OD  
1273 BROADWAY  
EL CAJON, CA 92021  
Phone: (619) 579-2345  
Fax: (619) 579-0876  
After Hours Phone: (619) 579-2345  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
9:00AM-5:00PM  
SA 9:00AM-12:00AM

CHAN, KWOK FUNG, OD  
Provider Gender: Male  
License Number: 35087  
NPI: 1407508385  
Provider English Spoken: Y  
Cultural Competency: Y  
WERNER OPTOMETRY  
2650 JAMACHA RD STE 155  
EL CAJON, CA 92019  
Phone: (619) 670-6296  
Fax: (619) 670-8852  
After Hours Phone: (619) 670-6296  
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Italian, Spanish  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
8:30AM-6:00PM
D7. 視力提供者目錄 - 眼科和視力服務

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:30AM-6:00PM

HAN, SULKI, OD
Provider Gender: Female
License Number: 34171
NPI: 1750802195
Provider English Spoken: Y
Korean
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:30AM-6:00PM

HAMOUIE, JUDY, OD
Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:30AM-6:00PM

HSU, CHRISTOPHER, MD
Provider Gender: Male
License Number: A65973
NPI: 1336167618
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:30AM-6:00PM

您的 PCP 的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權,然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單,請造訪 blueshieldca.com/fad。
| Name                  | Gender | License Number | NPI       | Provider English Spoken | Cultural Competency | Accessibility | Public Transportation | Hours                     | Address                                  | Phone                  | Fax                      | After Hours Phone | Accepting New Patients |
|-----------------------|--------|----------------|-----------|--------------------------|---------------------|---------------|-----------------------|--------------------------|--------------------------|-------------------------|------------------------|------------------------|------------------------|------------------------|
| KATZMAN, BARRY, MD    | Male   | A34834         | 1760473797| Y                        | N                   | CONTACT PROVIDER | 1T                    | M-F 8:30AM-6:00PM       | 300 S PIERCE ST STE 200 | EL CAJON, CA 92020  | (619) 440-5400          | (619) 440-0239          | Yes                    | Yes                    |
| KHIEU, TINA, OD       | Female | 34777          | 1962031617| Y                        | N                   | CONTACT PROVIDER | 1T                    | M-F 8:30AM-6:00PM       | 300 S PIERCE ST STE 200 | EL CAJON, CA 92020  | (619) 440-5400          | (619) 440-0239          | Yes                    | Yes                    |
| KHALIL, VADY, OD      | Male   | 35137          |           | Y                        | N                   | CONTACT PROVIDER | 1T                    | M-F 8:30AM-6:00PM       | 2650 JAMACHA RD STE 155 | EL CAJON, CA 92019  | (619) 440-5400          | (619) 440-0239          | Yes                    | Yes                    |
D7. 視力提供者目錄 - 眼科和視力服務

Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone: (619) 670-6296
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Italian, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6:00PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6:00PM

SCOTT, JEFFREY, OD
Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6:00PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
D7. 視力提供者目錄 - 眼科和視力服務

Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
_formatted_300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6:00PM
VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6:00PM
TONNU, ANH, OD
Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6:00PM
WERNER, REX, OD
Provider Gender: Male
License Number: 9378
NPI: 1891760716
Provider English Spoken: Y
Italian, Spanish
Cultural Competency: Y
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone: (619) 670-6296
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Italian, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9:00AM-5:00PM
TU 10:00AM-5:00PM
W-TH 9:00AM-5:00PM
F 8:00AM-2:00PM
WERNER, R AARON, OD
Provider Gender: Male
License Number: 13478
NPI: 1821259458
Provider English Spoken: Y
Spanish
Cultural Competency: Y
WERNER OPTOMETRY
2650 JAMACHA RD STE 155
EL CAJON, CA 92019
Phone: (619) 670-6296
Fax: (619) 670-8852
After Hours Phone: (619) 670-6296
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Italian, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

D7. 視力提供者目錄 - 眼科和視力服務

ZHAO, TAILUN, MD
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6:00PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP
300 S PIERCE ST STE 200
EL CAJON, CA 92020
Phone: (619) 440-5400
Fax: (619) 440-0239
After Hours Phone: (619) 440-5400
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-6:00PM

ADAMS, MONA, OD
Provider Gender: Female
License Number: 14457
NPI: 1942564521
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

BANSAL, PREETI, MD
Provider Gender: Female
License Number: A90890
NPI: 1871664631
Provider English Spoken: Y
Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104 ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

CHANG, TOM, MD
Provider Gender: Male
License Number: A69909
NPI: 1609848969
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104 ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104 ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

CHIU, STEPHAN, MD
Provider Gender: Male
License Number: A172634
NPI: 1053846956
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104 ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

HAMOUIE, JUDY, OD
Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584

藍盾的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清冊。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清冊，請造訪blueshieldca.com/fad。
D7. 眼科和視力服務

**ACUITY EYE GROUP**

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371

**Accepting New Patients:** Yes
**Site English Spoken:** Y
**Site Languages(s) Spoken:** Spanish
**American Sign Language (ASL):** N

**Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

**LEE, JASON, OD**

Provider Gender: Male
License Number: 14881
NPI: 1679985584
Provider English Spoken: Y
Spanish
Cultural Competency: Y

**RADY CHILDRENS HOSPITAL ENCINITAS**

477 N EL CAMINO REAL STE 302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403

**Accepting New Patients:** Yes
**Site English Spoken:** Y
**Site Languages(s) Spoken:** Spanish
**American Sign Language (ASL):** N

**Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

**MCGRAW, JOSEPH, MD**

Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y

**ACUITY EYE GROUP**

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371

**Accepting New Patients:** Yes
**Site English Spoken:** Y
**Site Languages(s) Spoken:** Spanish
**American Sign Language (ASL):** N

**Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

**MARR, RYAN, OD**

Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y

**ACUITY EYE GROUP**

320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371

**Accepting New Patients:** Yes
**Site English Spoken:** Y
**Site Languages(s) Spoken:** Spanish
**American Sign Language (ASL):** N

**Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

**MOLL, ANGELA, MD**

Provider Gender: Female
License Number: A105472
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: Y

**RADY CHILDRENS HOSPITAL ENCINITAS**

477 N EL CAMINO REAL STE D302
ENCINITAS, CA 92024
Phone: (858) 309-7702
Fax: (858) 966-7403

**Accepting New Patients:** Yes
**Site English Spoken:** Y
**Site Languages(s) Spoken:** Spanish
**American Sign Language (ASL):** N

**Accessibility:** CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

2347
MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Yes
Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
320 SANTA FE DR STE 104
ENCINITAS, CA 92024
Phone: (760) 943-7141
Fax: (760) 943-0371
After Hours Phone: (760) 943-7141
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD
Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

O HALLORAN, HENRY, MD
Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Yes
German, Spanish
Cultural Competency: Y
RADY CHILDRENS HOSPITAL ENCINITAS
477 N EL CAMINO REAL

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
American Sign Language (ASL): No
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

- **Site Languages(s) Spoken:** Spanish
  - **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Public transportation (within 1/2 mile from Site):** 1T
  - **Hours:** M-F 8:00AM-5:00PM

**VIVIRITO, MARY, OD**
- **Provider Gender:** Female
- **License Number:** 33798
- **NPI:** 1477968667
- **Provider English Spoken:** Y
- **Spanish Cultural Competency:** Y
- **ACUITY EYE GROUP**
- **Address:** 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
- **Phone:** (760) 943-7141
- **Fax:** (760) 943-0371
- **After Hours Phone:** (760) 943-7141
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Site Languages(s) Spoken:** Spanish
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Public transportation (within 1/2 mile from Site):** 1T
  - **Hours:** M-F 8:00AM-5:00PM

**ZHAO, TAILUN, MD**
- **Provider Gender:** Male
- **License Number:** C186414
- **NPI:** 1952659203
- **Provider English Spoken:** Y
- **Cultural Competency:** Y
- **ACUITY EYE GROUP**
- **Address:** 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
- **Phone:** (760) 943-7141
- **Fax:** (760) 943-0371
- **After Hours Phone:** (760) 943-7141
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Site Languages(s) Spoken:** Spanish
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Public transportation (within 1/2 mile from Site):** 1T
  - **Hours:** M-F 8:00AM-5:00PM

**ZVANUT, DONALD, OD**
- **Provider Gender:** Male
- **License Number:** 8642
- **NPI:** 1336211804
- **Provider English Spoken:** Y
- **Cultural Competency:** Y
- **ACUITY EYE GROUP**
- **Address:** 320 SANTA FE DR STE 104 ENCINITAS, CA 92024
- **Phone:** (760) 943-7141
- **Fax:** (760) 943-0371
- **After Hours Phone:** (760) 943-7141
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Site Languages(s) Spoken:** Spanish
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Public transportation (within 1/2 mile from Site):** 1T
  - **Hours:** M-F 8:30AM-4:30PM

**ADAMS, MONA, OD**
- **Provider Gender:** Female
- **License Number:** 14457
- **NPI:** 1942564521
- **Provider English Spoken:** Y
- **Cultural Competency:** Y
- **RADY CHILDRENS SPECIALISTS**
- **Address:** 2125 CITRACADO PKWY STE 200 ESCONDIDO, CA 92029
- **Phone:** (760) 755-7600
- **Fax:** (760) 755-7699
- **After Hours Phone:** (760) 755-7600
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Site Languages(s) Spoken:** Spanish
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Public transportation (within 1/2 mile from Site):** 1T
  - **Hours:** M-F 8:00AM-5:00PM

**ASIS, STEPHANIE, OD**
- **Provider Gender:** Female
- **License Number:** 34013
- **NPI:** 1902383540
- **Provider English Spoken:** Y
- **Cultural Competency:** Y
- **ACUITY EYE GROUP**
D7. 视力提供者目錄 - 眼科和视力服務

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879
⏰ After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
하시 영어로 말할 수 있는: Y
한국어로 말할 수 있는: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⏰ Hours: M-F
8:30AM-4:30PM

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879
⏰ After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
하시 영어로 말할 수 있는: Y
한국어로 말할 수 있는: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⏰ Hours: M-F
8:00AM-5:00PM

BANSAL, PREETI, MD
Provider Gender: Female
License Number: A90890
NPI: 1871664631
Provider English Spoken: Y
한국어로 말할 수 있는: N
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⏰ Hours: M-F
8:00AM-5:00PM

BHERGMARK, JAMIE, OD
Provider Gender: Female
License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y
RACY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
📞 Phone: (760) 755-7600
Fax: (760) 755-7699
⏰ After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
하시 영어로 말할 수 있는: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⏰ Hours: M-F
8:30AM-4:30PM

BHALIA, SHAGUN, MD
Provider Gender: Female
License Number: A154902
NPI: 1104237353
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
📞 Phone: (760) 755-7600
Fax: (760) 755-7699
⏰ After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
하시 영어로 말할 수 있는: Y
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⏰ Hours: M-F
8:30AM-4:30PM
D7. 視力提供者目錄 - 眼科和視力服務

**BINDER, NICHOLAS, MD**
Provider Gender: Male  
License Number: A124698  
NPI: 1306076716  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026  
Phone: (760) 743-5872  
Fax: (760) 743-5879  
After Hours Phone: (760) 743-5872  
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
8:00AM-5:00PM  

**DUONG, KIM, OD**
Provider Gender: Female  
License Number: 34222  
NPI: 1114448651  
Provider English Spoken: Y  
Vietnamese  
Cultural Competency: Y  
RADY CHILDRENS SPECIALISTS  
2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029  
Phone: (760) 755-7600  
Fax: (760) 755-7699  
After Hours Phone: (760) 755-7600  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
8:00AM-5:00PM  

**CHANG, TOM, MD**
Provider Gender: Male  
License Number: A69909  
NPI: 1609848969  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026  
Phone: (760) 743-5872  
Fax: (760) 743-5879  
After Hours Phone: (760) 743-5872  
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
8:00AM-5:00PM  

**GOLDSTONE, ADAM, OD**
Provider Gender: Male  
License Number: 11051  
NPI: 1316972995  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026  
Phone: (760) 743-5872  
Fax: (760) 743-5879  
After Hours Phone: (760) 743-5872  
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
8:00AM-5:00PM  

**HAMOUIE, JUDY, OD**
Provider Gender: Female  
License Number: 34984  
NPI: 1518638287  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026  
Phone: (760) 743-5872  
Fax: (760) 743-5879  
After Hours Phone: (760) 743-5872  
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
8:30AM-4:30PM  

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D7. 視力提供者目錄 - 眼科和視力服務

**Spanish**

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8:00AM-5:00PM

**ACUITY EYE GROUP**

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8:00AM-5:00PM

**Hudson, Henry, MD**

Provider Gender: Male

License Number: A65973

NPI: 1336167618

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8:00AM-5:00PM

**Kabakji, Nataly, OD**

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8:00AM-5:00PM

**Karapetian, Elena, OD**

Provider Gender: Female

License Number: 34514

NPI: 1184250417

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026

Phone: (760) 743-5872
Fax: (760) 743-5879

After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8:00AM-5:00PM

**Khalil, Vady, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y
D7. 視力提供者目錄 - 眼科和視力服務

ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

KIM, PHILIP, OD
Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

KLAREN, AMANDA, OD
Provider Gender: Female
License Number: 12617
NPI: 1396876611
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:30AM-4:30PM

LE, TAM, OD
Provider Gender: Female
License Number: 12951
NPI: 1235268707
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
TAM T LE OD INC
1711 E VALLEY PKWY STE 109
ESCONDIDO, CA 92027
Phone: (760) 737-6064
Fax: (760) 737-6064
After Hours Phone: (760) 737-6064
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

1/2 mile from Site): 1T
⚠️ Hours: M-TH
9:00AM-5:30PM
F 9:00AM-1:00PM

LEE, JASON, OD
Provider Gender: Male
License Number: 14881
NPI: 1679985584
Provider English Spoken: Y
Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
📞 Phone: (760) 755-7600
Fax: (760) 755-7699
⚠️ After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
⚠️ Site English Spoken: Y
 américain Sign Language (ASL): N
⚠️ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⚠️ Hours: M-F
8:00AM-5:00PM

MARR, RYAN, OD
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879
⚠️ After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
⚠️ Site English Spoken: Y
 américain Sign Language (ASL): N
⚠️ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⚠️ Hours: M-F
8:30AM-4:30PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
American Sign Language (ASL): N
⚠️ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⚠️ Hours: M-F
8:00AM-5:00PM

MOLL, ANGELA, MD
Provider Gender: Female
License Number: A105472
NPI: 1861648602
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
📍 2125 CITRACADO PKWY
STE 200
ESCONDIDO, CA 92029
📞 Phone: (760) 755-7600
Fax: (760) 755-7699
⚠️ After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
⚠️ Site English Spoken: Y
American Sign Language (ASL): N
⚠️ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⚠️ Hours: M-F
8:30AM-4:30PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Indonesian, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
📍 700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
📞 Phone: (760) 743-5872
Fax: (760) 743-5879
⚠️ After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
⚠️ Site English Spoken: Y
 américain Sign Language (ASL): N
⚠️ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⚠️ Hours: M-F
8:30AM-4:30PM
D7. 視力提供者目錄 - 眼科和視力服務

Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

O HALLORAN, HENRY, MD
Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
German, Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

MOVAGHAR, MANSOOR, MD
Provider Gender: Male
License Number: A100897
NPI: 1497792220
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

PANSARA, MEGHA, MD
Provider Gender: Female
License Number: A143429
NPI: 1184983728
Provider English Spoken: Y
Gujarati
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
Phone: (760) 755-7600
Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

PATEL, SARJAN, MD
2355

Fax: (760) 755-7699
After Hours Phone: (760) 755-7600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

PATEL, SARJAN, MD
D7. 視力提供者目錄 - 眼科和視力服務

Provider Gender: Male  
License Number: A114976  
NPI: 1316199326  
Provider English Spoken: Y  
Gujarati, Hindi, Spanish  
Cultural Competency: Y  
ACUITY EYE GROUP  
700 W EL NORTE PKWY STE 200  
ESCONDIDO, CA 92026  
Phone: (760) 743-5872  
Fax: (760) 743-5879  
After Hours Phone: (760) 743-5872  

Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F 8:00AM-5:00PM

SAMUEL, MICHAEL, MD  
Provider Gender: Male  
License Number: A83237  
NPI: 1730175670  
Provider English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F 8:00AM-5:00PM

PRABHU, SUJATA, MD  
Provider Gender: Female  
License Number: A115965  
NPI: 1982872552  
Provider English Spoken: Y  
Spanish  
Cultural Competency: Y  
ACUITY EYE GROUP  
700 W EL NORTE PKWY STE 200  
ESCONDIDO, CA 92026  
Phone: (760) 743-5872  
Fax: (760) 743-5879  
After Hours Phone: (760) 743-5872  

Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F 8:00AM-5:00PM

THACH, TERILYN, OD  
Provider Gender: Female  
License Number: 11456  
NPI: 1710030861  
Provider English Spoken: Y  
Vietnamese  
Cultural Competency: Y  
INSIGHT VISION OPTOMETRY  
2419 E VALLEY PKWY  
ESCONDIDO, CA 92027  
Phone: (760) 738-9931  
Fax: (760) 738-9933  
After Hours Phone: (760) 738-9931  

Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish, Vietnamese  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F 8:00AM-5:00PM

TON-NU, MY LINH, OD  
Provider Gender: Female  
License Number: 34990  
NPI: 1245733476  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
700 W EL NORTE PKWY STE 200  
ESCONDIDO, CA 92026  
Phone: (760) 743-5872  
Fax: (760) 743-5879  
After Hours Phone: (760) 743-5872  

Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F 8:00AM-5:00PM

Your PCP’s doctor group may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from the Mental Health Service Provider, and then these services may be covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
D7. 視力提供者目錄 - 眼科和視力服務

Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

TRAN, ALEXANDER, OD
Provider Gender: Male
License Number: 14136
NPI: 1902414790
Provider English Spoken: Y
Cultural Competency: Y
Rady Childrens Specialists

Provider English Spoken: French, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

ESCONDIDO EYECARE
613 E GRAND AVE
ESCONDIDO, CA 92025
Phone: (760) 747-7979
Fax: (760) 747-7799
After Hours Phone: (760) 747-7979
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, French, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 9:00AM-6:00PM W-TH 9:00AM-8:00PM

VIVIRITO, MARY, OD
Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Spanish
Cultural Competency: Y
Acuity Eye Group

Provider English Spoken: French
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:30AM-4:30PM

VERRET, ERIC, OD
Provider Gender: Male
License Number: 11401
NPI: 1194891853
Provider English Spoken: Y
Cultural Competency: Y

Provider English Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

ZAIDI, NOORINA, OD
Provider Gender: Female
License Number: 35615
NPI: 1023477262
Provider English Spoken: Y
Cultural Competency: Y
Acuity Eye Group

Provider English Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

ZHAO, TAILUN, MD
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y

ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

FALLBROOK

ARCHIBALD, JOHN, OD
Provider Gender: Male
License Number: 11813
NPI: 1902893357
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM

CONNOR, JEFFREY, OD
Provider Gender: Male
License Number: 33683
NPI: 1063968980
Provider English Spoken: Y
Spanish
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM

ZVANUT, DONALD, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
700 W EL NORTE PKWY
STE 200
ESCONDIDO, CA 92026
Phone: (760) 743-5872
Fax: (760) 743-5879
After Hours Phone: (760) 743-5872
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM
1/2 mile from Site): 1U

COOPER, MICHAEL, OD
Provider Gender: Male
License Number: 10476
NPI: 1164586244
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

DUONG, CHERYL, OD
Provider Gender: Female
License Number: 34070
NPI: 1366935678
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

GEORGE, KENDALL, OD
Provider Gender: Male
License Number: 34270
NPI: 1619529948
Provider English Spoken: Y
Spanish
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728
Fax: (760) 728-5934
After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

GEORGE, BRUCE, OD
Provider Gender: Male
License Number: 7696
NPI: 1356414551
Provider English Spoken: Y
Korean, Spanish
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 723-8417
Fax: (760) 758-2063
After Hours Phone: (760) 723-8417
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 1:00PM-5:00PM
TU 9:00AM-6:00PM
W-TH 9:00AM-5:00PM
F 9:00AM-1:00PM
SA 9:00AM-1:00PM

KHINDA, SUNEHA, OD
Provider Gender: Female
License Number: 35494
NPI: 1750066726
Provider English Spoken: Y
Cultural Competency: Y
INLAND EYE SPECIALISTS
521 E ELDER ST STE 102
FALLBROOK, CA 92028
Phone: (760) 728-5728

Your PCP’s doctor group may have its own network mental health service providers. Please refer to the list below. You may directly contact these providers. Please note, some services may require mental health service providers to obtain Blue Shield prior authorization before coverage will be paid.

To online access to mental health service providers list, please visit blueshieldca.com/fad.
Fax: (760) 728-5934
☎ After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
✔ Site English Spoken: Y
✔ Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F 8:00AM-5:00PM

TEW, JOHN, MD
Provider Gender: Male
License Number: A83206
NPI: 1174593354
Provider English Spoken: Y
Portuguese
Cultural Competency: Y
INLAND EYE SPECIALISTS
📍 521 E ELDER ST STE 102
FALLBROOK, CA 92028
☎ Phone: (760) 728-5728
Fax: (760) 728-5934
☎ After Hours Phone: (760) 728-5728
Accepting New Patients: Yes
✔ Site English Spoken: Y
✔ Site Languages(s) Spoken: Spanish

HANONO, HELFON, OD
Provider Gender: Male
License Number: 6681
NPI: 1619942034
Provider English Spoken: Y
Spanish
Cultural Competency: Y
IMPERIAL BEACH OPTOMETRY INC APC
📍 894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
☎ Phone: (619) 424-9333
Fax: (619) 424-3356
☎ After Hours Phone: (619) 424-9333
Accepting New Patients: Yes
✔ Site English Spoken: Y
✔ Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F 9:00AM-6:00PM

LA JOLLA

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
☎ Phone: (858) 457-3010
Fax: (858) 457-0028
☎ After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
✔ Site English Spoken: Y
✔ Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F 9:00AM-6:00PM

HANONO, ABRAHAM, OD
Provider Gender: Male
License Number: 14900
NPI: 1356754741
Provider English Spoken: Y
Hebrew, Spanish
Cultural Competency: Y
IMPERIAL BEACH OPTOMETRY INC APC
📍 894 PALM AVE STE B
IMPERIAL BEACH, CA 91932
☎ Phone: (619) 424-9333
Fax: (619) 424-3356
☎ After Hours Phone: (619) 424-9333
Accepting New Patients: Yes
✔ Site English Spoken: Y
✔ Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F 9:00AM-6:00PM

2360
D7. 視力提供者目錄 - 眼科和視力服務

1/2 mile from Site): 1U

CHIU, STEPHAN, MD
Provider Gender: Male
License Number: A172634
NPI: 1053846956
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP

Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM

HO, AMIEE, OD
Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD

Phone: (858) 534-6290
Fax: (858) 732-0921
D7. 視力提供者目錄 - 眼科和視力服務

‑ After Hours Phone: (858) 534-6290
  Accepting New Patients: Yes
  Site English Spoken: Y
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Public transportation (within 1/2 mile from Site): 1T
  Hours: M-F 8:00AM-4:30PM

HO, AMIEE, OD
Provider Gender: Female
License Number: 14527
NPI: 1396009478
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM
SA 8:00AM-2:00PM

HO, PAMELA, OD
Provider Gender: Female
License Number: 11033
NPI: 1275566010
Provider English Spoken: Y
Spanish
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-4:30PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

HUSTANA, LARA, OD
Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
French
Cultural Competency: Y
PERLMAN
D7. 視力提供者目錄 - 眼科和視力服務

OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
📞 Phone: (858) 534-6290
Fax: (858) 732-0921
⏰ After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
💡 Site English Spoken: Y
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⏰ Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

KALBAJKI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
📞 Phone: (858) 457-3010
Fax: (858) 457-0028
⏰ After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
💡 Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F
8:00AM-4:30PM

HUSTANA, LARA, OD
Provider Gender: Female
License Number: 11472
NPI: 1235161597
Provider English Spoken: Y
French
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92037
📞 Phone: (858) 534-6290
Fax: (858) 732-0921
⏰ After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
💡 Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F
8:00AM-4:30PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
📞 Phone: (858) 457-3010
Fax: (858) 457-0028
⏰ After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
💡 Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F
8:00AM-4:30PM

KHIEU, TINA, OD
Provider Gender: Female
License Number: 34777
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
📞 Phone: (858) 457-3010
Fax: (858) 457-0028
⏰ After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
💡 Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
_accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F
D7. 視力提供者目錄 - 眼科和視力服務

8:00AM-4:30PM

KIM, PHILIP, OD
Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

KULISCHAK, JOHN, OD
Provider Gender: Male
License Number: 9279
NPI: 1740205236
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

KULISCHAK, JOHN, OD
Provider Gender: Male
License Number: 9279
NPI: 1740205236
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM
SA 8:00AM-2:00PM

LAM, ANNE, OD
Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-4:30PM

D7. 視力提供者目錄 - 眼科和視力服務

8:00AM-4:30PM
SA 8:00AM-2:00PM

LAM, ANNE, OD
Provider Gender: Female
License Number: 12810
NPI: 1174550768
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
9:00AM-5:00PM

MARR, RYAN, OD
Provider Gender: Male
License Number: 35502
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-4:30PM

MCCLEAN, ESMERALDA, OD
Provider Gender: Female
License Number: 15001
NPI: 1962817981
Provider English Spoken: Y
Spanish
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-4:30PM

MIZOGUCHI, LIANNE, OD
Provider Gender: Female
License Number: 10104
NPI: 1619900313
Provider English Spoken: Y
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR
STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-4:30PM

2365
### D7. 视力提供者目錄 - 眼科和视力服务

<table>
<thead>
<tr>
<th>视力提供者</th>
<th>电话</th>
<th>地址</th>
<th>许可证号码</th>
<th>NPI</th>
<th>使用英语</th>
<th>文化熟练程度</th>
<th>公共交通（在从站点1/2英里范围内）</th>
<th>服务时间</th>
<th>新病人接受情况</th>
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<tbody>
<tr>
<td><strong>MIZOGUCHI, LIANNE, OD</strong>&lt;br&gt;提供者性别：女性&lt;br&gt;许可证号码：10104&lt;br&gt;NPI：1619900313&lt;br&gt;使用英语：Y&lt;br&gt;文化熟练程度：Y&lt;br&gt;UCSD SHILEY EYE CENTER&lt;br&gt;地址：9415 CAMPUS POINT DR&lt;br&gt;邮编：92093&lt;br&gt;电话：(858) 534-6290&lt;br&gt;传真：(858) 732-0921&lt;br&gt;夜间电话：(858) 534-6290&lt;br&gt;服务时间：M-F 8:00AM-4:30PM&lt;br&gt;接受新病人：是&lt;br&gt;站点语言：Y&lt;br&gt;美国手语（ASL）：N&lt;br&gt;无障碍：联系提供者</td>
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<tr>
<td><strong>MOOR, TRACY, OD</strong>&lt;br&gt;提供者性别：女性&lt;br&gt;许可证号码：35085&lt;br&gt;NPI：1184283277&lt;br&gt;使用英语：Y&lt;br&gt;文化熟练程度：Y&lt;br&gt;UCSD SHILEY EYE CENTER&lt;br&gt;地址：9415 CAMPUS POINT DR&lt;br&gt;邮编：92093&lt;br&gt;电话：(858) 534-6290&lt;br&gt;传真：(858) 732-0921&lt;br&gt;夜间电话：(858) 534-6290&lt;br&gt;服务时间：M-F 8:00AM-4:30PM&lt;br&gt;接受新病人：是&lt;br&gt;站点语言：Y&lt;br&gt;美国手语（ASL）：N&lt;br&gt;无障碍：联系提供者</td>
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<tr>
<td><strong>MOOR, TRACY, OD</strong>&lt;br&gt;提供者性别：男性&lt;br&gt;许可证号码：A125435&lt;br&gt;NPI：1235366782&lt;br&gt;使用英语：Y&lt;br&gt;文化熟练程度：Y&lt;br&gt;ACUITY EYE GROUP&lt;br&gt;地址：9850 GENESEE AVE STE 310&lt;br&gt;邮编：92037&lt;br&gt;电话：(858) 457-3010&lt;br&gt;传真：(858) 457-0028&lt;br&gt;夜间电话：(858) 457-3010&lt;br&gt;接受新病人：是&lt;br&gt;站点语言：Y&lt;br&gt;美国手语（ASL）：N&lt;br&gt;无障碍：联系提供者</td>
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</tr>
<tr>
<td><strong>PERRY, ARTHUR, MD</strong>&lt;br&gt;提供者性别：男性&lt;br&gt;许可证号码：C37934&lt;br&gt;NPI：1194832725&lt;br&gt;使用英语：Y&lt;br&gt;西班牙&lt;br&gt;文化熟练程度：Y&lt;br&gt;ACUITY EYE GROUP&lt;br&gt;地址：9850 GENESEE AVE STE 310&lt;br&gt;邮编：92037&lt;br&gt;电话：(858) 457-3010&lt;br&gt;传真：(858) 457-0028&lt;br&gt;夜间电话：(858) 457-3010&lt;br&gt;接受新病人：是&lt;br&gt;站点语言：Y&lt;br&gt;美国手语（ASL）：N&lt;br&gt;无障碍：联系提供者</td>
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</tr>
</tbody>
</table>
D7. 視力提供者目錄 - 眼科和視力服務

PRATT, STEVEN, MD
Provider Gender: Male
License Number: G32379
NPI: 1407963044
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
９850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
９850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

VINH, JOHN, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
９850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

TONNU, ANH, OD
Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
９850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D7. 視力提供者目錄 - 眼科和視力服務

VIVIRITO, MARY, OD
Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM
SA 8:00AM-2:00PM

VO, ANDREW MINH, OD
Provider Gender: Male
License Number: 33869
NPI: 1790291565
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
PERLMAN
OPHTHALMOLOGY-UCSD
9350 CAMPUS POINT DR STE 1B
LA JOLLA, CA 92037
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM
SA 8:00AM-2:00PM

YU, CAROL, OD
Provider Gender: Female
License Number: 34047
NPI: 1639697451
Provider English Spoken: Y
Spanish, Chinese
Cultural Competency: Y
UCSD SHILEY EYE CENTER
9415 CAMPUS POINT DR
LA JOLLA, CA 92093
Phone: (858) 534-6290
Fax: (858) 732-0921
After Hours Phone: (858) 534-6290
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM
SA 8:00AM-2:00PM
D7. 視力提供者目錄 - 眼科和視力服務

- **Site English Spoken**: Y
- **American Sign Language (ASL)**: N
- **Accessibility**: CONTACT PROVIDER
- **Public transportation (within 1/2 mile from Site)**: 1T
- **Hours**: M-F 8:00AM-4:30PM

**ZHAO, TAILUN, MD**
Provider Gender: Male
License Number: C186414
NPI: 1952659203
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
9850 GENESEE AVE STE 310
LA JOLLA, CA 92037
Phone: (858) 457-3010
Fax: (858) 457-0028
After Hours Phone: (858) 457-3010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

**ABOUL-HOSN, RYAN, OD**
Provider Gender: Male
License Number: 13688
NPI: 1467651919
Provider English Spoken: Y
Arabic
Cultural Competency: Y
DAVID M NEWMAN OD
5642 LAKE MURRAY BLVD
LA MESA, CA 91942
Phone: (619) 589-6263
Fax: (619) 589-6264
After Hours Phone: (619) 589-6263
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

**ZVANUT, DONALD, OD**
Provider Gender: Male
License Number: 8642
NPI: 1336211804
Provider English Spoken: Y
Cultural Competency: N
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

**ASIS, STEPHANIE, OD**
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
2369
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
D7. 光學提供者目錄 - 眼科和視力服務

AVALLONE, THOMAS, MD
Provider Gender: Male
License Number: A147199
NPI: 1679865950
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP

BAGHOUMIAN, MARINEH, OD
Provider Gender: Female
License Number: 14842
NPI: 1972929438
Provider English Spoken: Y
Armenian
Cultural Competency: Y
ACUITY EYE GROUP

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供
者。請注意，某些服務可能需要精神健康服務提供者獲得
Blue Shield的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪
blueshieldca.com/fad

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
D7. 視力提供者目錄 - 眼科和視力服務

<table>
<thead>
<tr>
<th>Name</th>
<th>Hours: M-F, 8:00AM-5:00PM</th>
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<tbody>
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<td><strong>BINDER, NICHOLAS, MD</strong></td>
<td></td>
</tr>
<tr>
<td>Provider Gender: Male</td>
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<tr>
<td>License Number: A124698</td>
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</tr>
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<td>NPI: 1306076716</td>
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<tr>
<td>ACUITY EYE GROUP</td>
<td></td>
</tr>
<tr>
<td>7339 EL CAJON BLVD STE J</td>
<td>LA MESA, CA 91942</td>
</tr>
<tr>
<td>Phone: (619) 722-8460</td>
<td></td>
</tr>
<tr>
<td>Fax: (619) 722-8465</td>
<td></td>
</tr>
<tr>
<td>After Hours Phone: (619) 722-8460</td>
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<tr>
<td>Accessibility: CONTACT PROVIDER</td>
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<tr>
<td>Public transportation (within 1/2 mile from Site): 1T</td>
<td></td>
</tr>
<tr>
<td>Hours: M-F, 8:00AM-5:00PM</td>
<td></td>
</tr>
</tbody>
</table>

| **CHEW, WESLEY, OD** |                           |
| Provider Gender: Male |                           |
| License Number: 14901 |                           |
| NPI: 1952714446       |                           |
| Provider English Spoken: Y |                         |
| Cultural Competency: Y |                           |
| ACUITY EYE GROUP       |                           |
| 7339 EL CAJON BLVD STE J | LA MESA, CA 91942       |
| Phone: (619) 722-8460  |                           |
| Fax: (619) 722-8465    |                           |
| After Hours Phone: (619) 722-8460 |               |
| Accepting New Patients: Yes |                          |
| Site English Spoken: Y |                           |
| Site Languages(s) Spoken: Spanish |                     |
| American Sign Language (ASL): N |                      |
| Accessibility: CONTACT PROVIDER |                |
| Public transportation (within 1/2 mile from Site): 1T |         |
| Hours: M-F, 8:00AM-5:00PM |                     |

| **CAUCHI, CAROLINE GUERRERO, OD** |                           |
| Provider Gender: Female |                           |
| License Number: 6882 |                           |
| NPI: 1831268903       |                           |
| Provider English Spoken: Y |                         |
| Spanish               |                           |
| Cultural Competency: Y |                           |
| VISION SOLUTIONS OPTOMETRY |                       |
| 8235 UNIVERSITY AVE LA MESA, CA 91942 |         |

| **CHANG, TOM, MD** |                           |
| Provider Gender: Male |                           |
| License Number: A69909 |                           |
| NPI: 1609848969       |                           |
| Provider English Spoken: Y |                         |
| Cultural Competency: Y |                           |
| EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP |                   |
| 5565 GROSSMONT CENTER DR # 551 | LA MESA, CA 91942 |
| Phone: (619) 465-2020  |                           |
| Fax: (619) 698-1189    |                           |
| After Hours Phone: (619) 465-2020 |               |
| Accepting New Patients: Yes |                          |
| Site English Spoken: Y |                           |
| Site Languages(s) Spoken: Spanish |                     |
| American Sign Language (ASL): N |                      |
| Accessibility: CONTACT PROVIDER |                |
| Public transportation (within 1/2 mile from Site): 1T |         |
| Hours: M-F, 8:00AM-5:00PM |                     |

| **CHIU, STEPHAN, MD** |                           |
| Provider Gender: Male |                           |
| License Number: A172634 |                           |
| NPI: 1053846956       |                           |
| Provider English Spoken: Y |                         |
| Spanish               |                           |
| Cultural Competency: Y |                           |
| EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP |                   |

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D7. 視力提供者目錄 - 眼科和視力服務

CONRAD, RANDALL, OD
Provider Gender: Male
License Number: 6423
NPI: 1962617464
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ALVARADO EYE ASSOCIATES MED CLINIC INC
7877 PARKWAY DR STE 100
LA MESA, CA 91942
Phone: (619) 460-3711
Fax: (619) 460-2184
After Hours Phone: (619) 460-3711
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:30AM-4:30PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

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D7. 視力提供者目錄 - 眼科和視力服務

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
☎ Phone: (619) 465-2020
Fax: (619) 698-1189
 kè After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕗 Hours: M-F 8:00AM-5:00PM
TU 9:00AM-6:00PM
W 8:00AM-4:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM
SA 8:00AM-1:00PM

GILES, GREGORY, OD
Provider Gender: Male
License Number: 11362
NPI: 1114931250
Provider English Spoken: Y
Cultural Competency: Y
LA MESA VISION CARE
8007 LA MESA BLVD
LA MESA, CA 91942
☎ Phone: (619) 466-5665
Fax: (619) 466-5688
 kè After Hours Phone: (619) 466-5665
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
🕗 Hours: M-F 8:00AM-5:00PM
TU 9:00AM-5:00PM

GOLLOGLY, HEIDRUN, MD
Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
German, French, Spanish
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
☎ Phone: (619) 465-2020
Fax: (619) 698-1189
 kè After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕗 Hours: M-F 8:00AM-5:00PM
TU 9:00AM-5:00PM
W 9:00AM-5:00PM
TH 9:00AM-5:00PM
F 9:00AM-5:00PM
SA 8:00AM-1:00PM

HAIM, BRUCE, MD
Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
☎ Phone: (619) 722-8460
Fax: (619) 722-8465
 kè After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
🕗 Hours: M-F 8:00AM-5:00PM
TU 9:00AM-5:00PM
W 9:00AM-5:00PM
TH 9:00AM-5:00PM
F 9:00AM-5:00PM
SA 8:00AM-1:00PM

2373
D7. 視力提供者目錄 - 眼科和視力服務

- **HAIGHT, BRUCE, MD**
  Provider Gender: Male
  License Number: G41117
  NPI: 1427029628
  Provider English Spoken: Y
  Cultural Competency: Y
  EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
  5565 GROSSMONT CENTER DR # 551
  LA MESA, CA 91942
  Phone: (619) 465-2020
  Fax: (619) 698-1189
  After Hours Phone: (619) 465-2020
  Accepting New Patients: Yes
  Site English Spoken: Y
  Site Languages(s) Spoken: Spanish
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Public transportation (within 1/2 mile from Site): 1T
  Hours: M-F 8:00AM-5:00PM

- **HAMOUIE, JUDY, OD**
  Provider Gender: Female
  License Number: 34984
  NPI: 1518638287
  Provider English Spoken: Y
  Cultural Competency: Y
  ACUITY EYE GROUP
  7339 EL CAJON BLVD STE J
  LA MESA, CA 91942
  Phone: (619) 722-8460
  Fax: (619) 722-8465
  After Hours Phone: (619) 722-8460
  Accepting New Patients: Yes
  Site English Spoken: Y
  Site Languages(s) Spoken: Spanish
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Public transportation (within 1/2 mile from Site): 1T
  Hours: M-F 8:00AM-5:00PM

- **HAN, SULKI, OD**
  Provider Gender: Female
  License Number: 34171
  NPI: 1750802195
  Provider English Spoken: Y
  Cultural Competency: Y
  LA MESA VISION CARE
  8007 LA MESA BLVD
  LA MESA, CA 91942
  Phone: (619) 466-5665
  Fax: (619) 466-5688
  After Hours Phone: (619) 466-5665
  Accepting New Patients: Yes
  Site English Spoken: Y
  Site Languages(s) Spoken: Korean
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Public transportation (within 1/2 mile from Site): 1U
  Hours: M 8:00AM-4:00PM
  TU 9:00AM-6:00PM
  W 8:00AM-4:00PM
  TH 9:00AM-6:00PM
  F 9:00AM-5:00PM
  SA 8:00AM-1:00PM

- **HSU, CHRISTOPHER, MD**
  Provider Gender: Male
  License Number: 1336167618
  NPI: 1336167618
  Provider English Spoken: Y

American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

**HIXSON, THOMAS, OD**
Provider Gender: Male
License Number: 7490
NPI: 1528072683
Provider English Spoken: Y
Cultural Competency: Y
LA MESA VISION CARE
8007 LA MESA BLVD
LA MESA, CA 91942
Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone: (619) 466-5665
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM

**HAMOUIE, JUDY, OD**
Provider Gender: Female
License Number: 34984
NPI: 1518638287
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

**HAIGHT, BRUCE, MD**
Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

**HAN, SULKI, OD**
Provider Gender: Female
License Number: 34171
NPI: 1750802195
Provider English Spoken: Y
Cultural Competency: Y
LA MESA VISION CARE
8007 LA MESA BLVD
LA MESA, CA 91942
Phone: (619) 466-5665
Fax: (619) 466-5688
After Hours Phone: (619) 466-5665
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Korean
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 8:00AM-4:00PM
TU 9:00AM-6:00PM
W 8:00AM-4:00PM
TH 9:00AM-6:00PM
F 9:00AM-5:00PM
SA 8:00AM-1:00PM

**HSU, CHRISTOPHER, MD**
Provider Gender: Male
License Number: A65973
NPI: 1336167618
Provider English Spoken: Y
D7. 視力提供者目錄 - 眼科和視力服務

*Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

HUNG, JANICE, OD
Provider Gender: Female
License Number: 34296
NPI: 1750917936
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:30AM-4:30PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Arabic
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Arabic
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
D7. 視力提供者目錄 - 眼科和視力服務

Fax: (619) 698-1189
 undeniable

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8:00AM-5:00PM

LEE, JENNIFER, OD

Provider Gender: Female

License Number: 33443

NPI: 1891147351

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10:00AM-5:00PM

TU-TH 9:00AM-6:00PM

F 10:00AM-5:00PM

MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551

LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

MCGRAW, JOSEPH, MD
Provider Gender: Male
License Number: A155228
NPI: 1588624852
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM

MERALI, MURTZA, OD
Provider Gender: Female
License Number: 14558
NPI: 1972944189
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
D7. 視力提供者目錄 - 眼科和視力服務

**PROVIDER**

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

**MORRISON REYES, JOSHUA, MD**

Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Indonesian, Spanish
Cultural Competency: Y

**EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP**

5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942

Phone: (619) 465-2020
Fax: (619) 698-1189

After Hours Phone: (619) 465-2020
Accepting New Patients: Yes

Site English Spoken: Y

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 10:00AM-4:00PM
W 10:00AM-4:00PM
F 10:00AM-4:00PM

**NGUYEN, THY, OD**

Provider Gender: Female
License Number: 12746
NPI: 1750490413
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y

**ACUITY EYE GROUP**

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465

After Hours Phone: (619) 722-8460
Accepting New Patients: Yes

Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:30AM-4:30PM

**NEWMAN, DAVID, OD**

Provider Gender: Male
License Number: 7296
NPI: 1508856378
Provider English Spoken: Y

Cultural Competency: Y

**DAVID M NEWMAN OD**

5642 LAKE MURRAY BLVD
LA MESA, CA 91942

Phone: (619) 589-6263
Fax: (619) 589-6264

After Hours Phone: (619) 589-6263
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

**OU, JOCELYN, OD**

Provider Gender: Female
License Number: 34063
NPI: 1225518996
Provider English Spoken: Y

**ALVARADO EYE ASSOCIATES MED CLINIC INC**

7877 PARKWAY DR STE 100
LA MESA, CA 91942

Phone: (619) 460-3711
Fax: (619) 460-2184

After Hours Phone: (619) 460-3711
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-5:00PM

**PANDYA, BHUMIKA, OD**

Provider Gender: Female
License Number: 35025
NPI: 1063182822
Provider English Spoken: Y
Hindi
Cultural Competency: Y

**ACUITY EYE GROUP**

7339 EL CAJON BLVD STE J
LA MESA, CA 91942

Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
- Hours: M-F
  8:00AM-5:00PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
- Hours: M-F
  8:00AM-5:00PM

PETERS, JAMIE, OD
Provider Gender: Female
License Number: 10724
NPI: 1073691077
Provider English Spoken: Y
Spanish
Cultural Competency: Y
VISION SOLUTIONS OPTOMETRY
8235 UNIVERSITY AVE
LA MESA, CA 91942
Phone: (619) 461-4913
Fax: (888) 509-6483
After Hours Phone: (619) 461-4913
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within
1/2 mile from Site): 1T
- Hours: M-F
  8:00AM-5:00PM

PRABHU, SUJATA, MD
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Spanish
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within
1/2 mile from Site): 1T
- Hours: M-F
  8:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

1/2 mile from Site): 1U

PRABHU, SUJATA, MD
Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

SAMUEL, MICHAEL, MD
Provider Gender: Male
License Number: A83237
NPI: 1730175670
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

QUACH, PHUC, OD
Provider Gender: Male
License Number: 12891
NPI: 1770617805
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

SCOTT, JEFFREY, OD
Provider Gender: Male
License Number: 34978
NPI: 1568813434
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-5:00PM

TILLMAN, SYLVIA, OD
Provider Gender: Female
License Number: 9726
NPI: 1174730824
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

722-8460
Accepting New Patients: Yes
.Site English Spoken: Y
.Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⏰ Hours: M-F 8:00AM-5:00PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
📍 5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
📞 Phone: (619) 465-2020
Fax: (619) 698-1189
⏰ After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
.Site English Spoken: Y
.Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⏰ Hours: M-F 8:00AM-5:00PM

TRAN, HENRY, OD
Provider Gender: Male
License Number: 15159
NPI: 1467846709
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
📍 7339 EL CAJON BLVD STE J
LA MESA, CA 91942
📞 Phone: (619) 722-8460
Fax: (619) 722-8465
⏰ After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
.Site English Spoken: Y
.Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F 8:00AM-5:00PM

TSUI, NANCY, OD
Provider Gender: Female
License Number: 33944
NPI: 1841785037
Provider English Spoken: Y

2382
D7. 視力提供者目錄 - 眼科和視力服務

**ACUITY EYE GROUP**

7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-5:00PM

**VINV, JOHN, OD**
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y
EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM

**VIVIRITO, MARY, OD**
Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM

**EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP**
5565 GROSSMONT CENTER DR # 551
LA MESA, CA 91942
Phone: (619) 465-2020
Fax: (619) 698-1189
After Hours Phone: (619) 465-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM

**VIVIRITO, MARY, OD**
Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Spanish
Cultural Competency: Y
ACUITY EYE GROUP
7339 EL CAJON BLVD STE J
LA MESA, CA 91942
Phone: (619) 722-8460
Fax: (619) 722-8465
After Hours Phone: (619) 722-8460
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

- **WONG, SHARON, OD**
  Provider Gender: Female
  License Number: 15137
  NPI: 1497159552
  Provider English Spoken: Y
  Spanish
  Cultural Competency: Y
  ACUITY EYE GROUP
  7339 EL CAJON BLVD STE J
  LA MESA, CA 91942
  Phone: (619) 722-8460
  Fax: (619) 722-8465
  After Hours Phone: (619) 722-8460
  Hours: M-F
  8:00AM-5:00PM
  Accepting New Patients: Yes
  Site English Spoken: Y
  Site Languages(s) Spoken: Spanish
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Public transportation (within 1/2 mile from Site): 1T
  Hours: M-F
  8:00AM-5:00PM
  ZVANUT, DONALD, OD
  Provider Gender: Male
  License Number: 8642
  NPI: 1336211804
  Provider English Spoken: Y
  Cultural Competency: Y
  ACUITY EYE GROUP
  7339 EL CAJON BLVD STE J
  LA MESA, CA 91942
  Phone: (619) 722-8460
  Fax: (619) 722-8465
  After Hours Phone: (619) 722-8460
  Accepting New Patients: Yes
  Site English Spoken: Y
  Site Languages(s) Spoken: Spanish
  American Sign Language (ASL): N
  Accessibility: CONTACT PROVIDER
  Public transportation (within 1/2 mile from Site): 1T
  Hours: M-F
  8:00AM-5:00PM
  FLEMING, JOHN, OD
  Provider Gender: Male
  License Number: 8461
  NPI: 1033192133
  Provider English Spoken: Y
  Cultural Competency: Y
  JOHN C FLEMING OD
  9710 WINTER GARDENS BLVD STE A
D7. 視力提供者目錄 - 眼科和視力服務

LAKESIDE, CA 92040
Phone: (619) 443-1075
Fax: (619) 443-9382
After Hours Phone: (619) 443-1075
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

JOHNSON, CHRISTOPHER, OD
Provider Gender: Male
License Number: 15100
NPI: 1568861425
Provider English Spoken: Y
Cultural Competency: Y

JOHN C FLEMING OD
9710 WINTER GARDENS BLVD STE A
LAKESIDE, CA 92040
Phone: (619) 443-1075
Fax: (619) 443-9382
After Hours Phone: (619) 443-1075
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

HOANG, KENNY, OD
Provider Gender: Male
License Number: 35207
NPI: 1740868603
Provider English Spoken: Y
Cultural Competency: Y

JOHN C FLEMING OD
9710 WINTER GARDENS BLVD STE A
LAKESIDE, CA 92040
Phone: (619) 443-1075
Fax: (619) 443-9382
After Hours Phone: (619) 443-1075
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TH 9:00AM-5:00PM
F 9:00AM-4:00PM

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

NATIONAL CITY

AOTO, KIM, OD
Provider Gender: Female
License Number: 14524
NPI: 1780935650
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y

WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
D7. 视力提供者目录 - 眼科和视力服务

**ACUITY EYE GROUP**
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TU 8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

**DEAN, MOENA, OD**
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM

**DYER, SHARON, OD**
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM
D7. 視力提供者目錄 - 眼科和視力服務

**GOLLOGLY, HEIDRUN, MD**
Provider Gender: Female
License Number: A134761
NPI: 1477879823
Provider English Spoken: Y
German, French, Spanish
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

**HAIGHT, BRUCE, MD**
Provider Gender: Male
License Number: G41117
NPI: 1427029628
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

**HUNTINGTON, JANICE, OD**
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

**HUDSON, HENRY, MD**
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TU 8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

**HUNG, JANICE, OD**
Provider Gender: Female
License Number: 34296
NPI: 1750917936
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
After Hours Phone: (619) 470-2700
D7. 視力提供者目錄 - 眼科和視力服務

Fax: (619) 267-8221
☐ After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
☑ Site English Spoken: Y
☒ Site Languages(s) Spoken: Arabic
☐ American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F 8:00AM-4:30PM

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y Arabic
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
☎ Phone: (619) 470-2700
Fax: (619) 267-8221
☐ After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
☑ Site English Spoken: Y
☒ Site Languages(s) Spoken: Arabic
☐ American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F 8:00AM-4:30PM

KALRA, ANKUR, OD
Provider Gender: Male
License Number: 11898
NPI: 1124195789
Provider English Spoken: Y Hindi
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
☎ Phone: (619) 470-2700
Fax: (619) 267-8221
☐ After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
☑ Site English Spoken: Y
☒ Site Languages(s) Spoken: Spanish
☐ American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
⏰ Hours: SU 10:00AM-4:00PM
M-F 9:00AM-6:00PM
SA 9:00AM-5:00PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y Spanish
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
☎ Phone: (619) 470-2700
Fax: (619) 267-8221
☐ After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
☑ Site English Spoken: Y
☒ Site Languages(s) Spoken: Spanish
☐ American Sign Language (ASL): N
☒ Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
⏰ Hours: M-F 8:00AM-4:30PM

KEDDINGTON, JOAN, OD
Provider Gender: Female
D7. 視力提供者目錄 - 眼科和視力服務

License Number: 6263
NPI: 1992872691
Provider English Spoken: Y
Spanish
Cultural Competency: Y
LUSTRO EYEWORKS OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone: (619) 477-2159

Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Public transportation (within 1/2 mile from Site): 1T
- Hours: M-TU 8:00AM-6:00PM
  W 8:30AM-5:00PM
  TH 8:00AM-6:00PM
  F 8:00AM-5:00PM

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Arabic
Cultural Competency: Y
WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG
NATIONAL CITY, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221
After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
- Site English Spoken: Y
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Public transportation (within 1/2 mile from Site): 1U
- Hours: M-F 8:00AM-4:30PM

KING, MARY, OD
Provider Gender: Female
License Number: 13711
NPI: 1578792107
Provider English Spoken: Y
Spanish
Cultural Competency: Y
LUSTRO EYEWORKS OPTOMETRY

1481 E PLAZA BLVD
NATIONAL CITY, CA 91950
Phone: (619) 477-2159
Fax: (619) 477-2128
After Hours Phone: (619) 477-2159
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Arabic, Hindi, Spanish
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
- Public transportation (within 1/2 mile from Site): 1T
- Hours: SU 10:00AM-4:00PM
  M-F 9:00AM-6:00PM
  SA 9:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

LEE, AUSTIN, OD
Provider Gender: Male
License Number: 14519
NPI: 1922356914
Provider English Spoken: Y
Cultural Competency: Y
VIVE OPTOMETRY
1033 HIGHLAND AVE
NATIONAL CITY, CA 91950
Phone: (619) 477-2771
Fax: (619) 477-1680
After Hours Phone: (619) 477-2771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Tagalog
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

LEE, SALLY, OD
Provider Gender: Female
License Number: 20A8088
NPI: 1457468514
Provider English Spoken: Y
Spanish, Chinese
Cultural Competency: Y

SAN DIEGO EYE PROFESSIONALS
2345 E 8TH ST STE 111
NATIONAL CITY, CA 91950
Phone: (619) 583-4295
Fax: (619) 825-7300
After Hours Phone: (619) 583-4295
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

MARLAY, GREG, OD
Provider Gender: Male
License Number: 6998
NPI: 1306903083
Provider English Spoken: Y
Cultural Competency: Y

MARLAY ENTERPRISES
1132 E PLAZA BLVD STE 201
NATIONAL CITY, CA 91950
Phone: (619) 477-4166
Fax: (619) 477-4166
After Hours Phone: (619) 477-4166
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

MARR, RYAN, OD
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y

ACUITY EYE GROUP
655 EUCLID AVE STE 302
NATIONAL CITY, CA 91950
Phone: (619) 472-1010
Fax: (619) 479-5233
After Hours Phone: (619) 472-1010
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

WEST COAST EYE CARE

1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
W 10:00AM-6:00PM
F 10:00AM-6:00PM
SA 10:00AM-2:00PM

MARR, RYAN, OD
Provider Gender: Male
License Number: 35302
NPI: 1235857525
Provider English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE
D7. 視力提供者目錄 - 眼科和視力服務

- **2240 E PLAZA BLVD STE FG**
  - **NATIONAL CITY, CA 91950**
  - **Phone:** (619) 470-2700
  - **Fax:** (619) 267-8221
  - **After Hours Phone:** (619) 470-2700
  - **Accepting New Patients:** Yes
  - **Site English Spoken:** Y
  - **American Sign Language (ASL):** N
  - **Accessibility:** CONTACT PROVIDER
  - **Public transportation (within 1/2 mile from Site):** 1U
  - **Hours:** M-F 8:00AM-4:30PM

**ACUITY EYE GROUP**

**2240 E PLAZA BLVD STE FG**
- **NATIONAL CITY, CA 91950**
- **Phone:** (619) 470-2700
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **American Sign Language (ASL):** N

**WEST COAST EYE CARE**

**2240 E PLAZA BLVD STE FG**
- **NATIONAL CITY, CA 91950**
- **Phone:** (619) 470-2700
- **Fax:** (619) 267-8221
- **After Hours Phone:** (619) 470-2700
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Site Languages(s) Spoken:** Spanish
- **American Sign Language (ASL):** N

**MCGRAW, JOSEPH, MD**

**Provider Gender:** Male
- **License Number:** A155228
- **NPI:** 1588624852
- **Provider English Spoken:** Y
- **Cultural Competency:** Y

**ACUITY EYE GROUP**

**655 EUCLID AVE STE 302**
- **NATIONAL CITY, CA 91950**
- **Phone:** (619) 472-1010
- **Fax:** (619) 479-5233
- **After Hours Phone:** (619) 472-1010
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Site Languages(s) Spoken:** Spanish

**MENDOZA, RAYMUNDO, OD**

**Provider Gender:** Male
- **License Number:** 8150
- **NPI:** 1306837760
- **Provider English Spoken:** Y
- **Language(s):** Spanish

**ACUITY EYE GROUP**

**655 EUCLID AVE STE 302**
- **NATIONAL CITY, CA 91950**
- **Phone:** (619) 472-1010
- **Fax:** (619) 479-5233
- **After Hours Phone:** (619) 472-1010
- **Accepting New Patients:** Yes
- **Site English Spoken:** Y
- **Site Languages(s) Spoken:** Spanish

**MORRISON REYES, JOSHUA, MD**

**Provider Gender:** Male
- **License Number:** A125435
- **NPI:** 1235366782
- **Provider English Spoken:** Y
- **Language(s):** Indonesian, Spanish

**ACUITY EYE GROUP**

**2403 E PLAZA BLVD**
- **NATIONAL CITY, CA 91950**
- **Phone:** (619) 475-2184
- **Fax:** (619) 475-3917
- **After Hours Phone:** (619) 475-2184
- **Hours:** M-TU 10:00AM-5:00PM
  - W 8:30AM-5:00PM
  - TH-F 10:00AM-5:00PM
<table>
<thead>
<tr>
<th>Provider Name</th>
<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>Provider English Spoken</th>
<th>Cultural Competency</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>MORRISON REYES, JOSHUA, MD</td>
<td>Male</td>
<td>A125435</td>
<td>1235366782</td>
<td>Y</td>
<td>Y</td>
<td>TH 8:00AM-6:00PM F 8:00AM-5:00PM</td>
</tr>
<tr>
<td>NGUYEN, THERESA, OD</td>
<td>Female</td>
<td>35530TLG</td>
<td>1609555713</td>
<td>Y</td>
<td>Y</td>
<td>1481 E PLAZA BLVD NATIONAL CITY, CA 91950 Phone: (619) 477-2159 Fax: (619) 477-2128</td>
</tr>
<tr>
<td>PATEL, SARJAN, MD</td>
<td>Male</td>
<td>A114976</td>
<td>1316199326</td>
<td>Y</td>
<td>Y</td>
<td>2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950 Phone: (619) 470-2700 Fax: (619) 267-8221</td>
</tr>
<tr>
<td>PATEL, GITANE, MD</td>
<td>Male</td>
<td>A108603</td>
<td>1710171434</td>
<td>Y</td>
<td>Y</td>
<td>2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950 Phone: (619) 470-2700 Fax: (619) 267-8221</td>
</tr>
<tr>
<td>PRABHU, SUJATA, MD</td>
<td>Female</td>
<td>A115965</td>
<td>1982872552</td>
<td>Y</td>
<td>Y</td>
<td>2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950 Phone: (619) 470-2700 Fax: (619) 267-8221</td>
</tr>
</tbody>
</table>

**D7. 視力提供者目錄 - 眼科和視力服務**

After Hours Phone: (619) 477-2159
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Arabic, Hindi, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-4:30PM

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
2240 E PLAZA BLVD STE FG NATIONAL CITY, CA 91950
Phone: (619) 470-2700 Fax: (619) 267-8221
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:30PM
| Name                  | Gender   | License Number | NPI      | English Spoken | Competency | Providers | Phone       | Fax          | After Hours Phone | Patient Acceptance | Languages Spoken | American Sign Language (ASL) | Accessibility |
|----------------------|----------|----------------|----------|---------------|------------|-----------|-------------|--------------|------------------|------------------|----------------|----------------|----------------|------------------|
| **TOUBIA, ELIAS, OD** | Male     | 33758          | 1740701481 | Y             | Y          | 1          | (619) 470-2700 | (619) 267-8221 | (619) 470-2700   | Yes              | Arabic, Hindi, Spanish | N              | CONTACT PROVIDER |
| **TON-NU, MY LINH, OD** | Female  | 34990          | 1245733476 | Y             | Y          | 1          | (619) 472-1010 | (619) 479-5233 | (619) 472-1010   | Yes              | Arabic, Hindi, Spanish | N              | CONTACT PROVIDER |
| **TON-NU, MY LINH, OD** | Male     | 14177          | 1003102724 | Y             | Y          | 1          | (619) 472-1010 | (619) 479-5233 | (619) 472-1010   | Yes              | Arabic, Hindi, Spanish | N              | CONTACT PROVIDER |

您的PCP的医生团体可能有自己的网络内精神健康服务提供者。请参阅下方的清单。您可直接联络该等提供者。请注意，某些服务可能需要精神健康服务提供者获得Blue Shield的事先授权，然后该服务才能获得承保。如欲线上获取精神健康服务提供者清单，请造访blueshieldca.com/fad。
D7. 視力提供者目錄 - 眼科和視力服務

Accepting New Patients: Yes

- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU 8:00AM-6:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-5:00PM

Vinh, John, OD
Provider Gender: Male
License Number: 14177
NPI: 1003102724
Provider English Spoken: Y
Cultural Competency: Y

West Coast Eye Care
2240 E Plaza Blvd Ste FG
National City, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221

After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
- Site English Spoken: Y
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8:00AM-4:30PM

Vivirito, Mary, OD
Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Spanish
Cultural Competency: Y

West Coast Eye Care
2240 E Plaza Blvd Ste FG
National City, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221

After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
- Site English Spoken: Y
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8:00AM-4:30PM

Vivirito, Mary, OD
Provider Gender: Female
License Number: 33798
NPI: 1477968667
Provider English Spoken: Y
Spanish
Cultural Competency: Y

West Coast Eye Care
2240 E Plaza Blvd Ste FG
National City, CA 91950
Phone: (619) 470-2700
Fax: (619) 267-8221

After Hours Phone: (619) 470-2700
Accepting New Patients: Yes
- Site English Spoken: Y
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8:00AM-4:30PM

Wu, Eva, OD
Provider Gender: Female
License Number: 14743
NPI: 1073954442
Provider English Spoken: Y
Spanish, Chinese
Cultural Competency: Y

Vive Optometry
1033 Highland Ave
National City, CA 91950
Phone: (619) 477-2771
Fax: (619) 477-1680

After Hours Phone: (619) 477-2771
Accepting New Patients: Yes
- Site English Spoken: Y
- American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

Hours: Tu 10:00AM-5:00PM
W-F 9:30AM-5:00PM

Zvanut, Donald, OD
Provider Gender: Male
License Number: 8642
NPI: 1336211804
### OCEANSIDE

**KASAI, SARAH, OD**  
**Provider Gender:** Female  
**License Number:** 34226  
**NPI:** 1023406238  
**Provider English Spoken:** Y  
**Cultural Competency:** Y  
**NORTH COAST OPTOMETRY**  
**Address:** 3915 MISSION AVE STE 2  
**City:** OCEANSIDE, CA 92058  
**Phone:** (760) 757-8771  
**After Hours Phone:** (760) 757-8771  
**Accepting New Patients:** Yes  
- **Site English Spoken:** Y  
- **Site Languages(s) Spoken:** Spanish  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  
- **Public transportation (within 1/2 mile from Site):** 1T  
- **Hours:** M-TU 9:00AM-6:00PM  
  W 9:00AM-6:00PM  
  TH 9:00AM-6:00PM  
  F 9:00AM-6:00PM

**NISKANEN, RACHEL, OD**  
**Provider Gender:** Female  
**License Number:** 34663  
**NPI:** 1467065797  
**Provider English Spoken:** Y  
**Cultural Competency:** Y  
**NORTH COAST OPTOMETRY**  
**Address:** 3915 MISSION AVE STE 2  
**City:** OCEANSIDE, CA 92058  
**Phone:** (760) 757-8771  
**After Hours Phone:** (760) 757-8771  
**Accepting New Patients:** Yes  
- **Site English Spoken:** Y  
- **Site Languages(s) Spoken:** Spanish  
- **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  
- **Public transportation (within 1/2 mile from Site):** 1T  
- **Hours:** M-TU 9:00AM-6:00PM  
  W 10:00AM-7:00PM  
  TH 9:00AM-6:00PM  
  F 9:00AM-5:00PM

**RING, ROBERT, OD**  
**Provider Gender:** Male  
**License Number:** 6781  
**NPI:** 1336228840  
**Provider English Spoken:** Y  
**Cultural Competency:** Y  
**NORTH COAST OPTOMETRY**  
**Address:** 3998 VISTA WAY STE 204  
**City:** OCEANSIDE, CA 92056  
**Phone:** (760) 726-9383  
**After Hours Phone:** (760) 726-9383  
**Accepting New Patients:** Yes  
- **Site English Spoken:** Y  
- **Site Languages(s) Spoken:** Spanish  
- **American Sign Language (ASL):** 2395

**ROSA, ADAM, OD**  
**Provider Gender:** Male  
**License Number:** 34093  
**NPI:** 1295250264  
**Provider English Spoken:** Y  
**Spanish**  
**Cultural Competency:** Y  
**NORTH COAST OPTOMETRY**  
**Address:** 3915 MISSION AVE STE 2  
**City:** OCEANSIDE, CA 92058  
**Phone:** (760) 757-8771  
**After Hours Phone:** (760) 757-8771  
**Accepting New Patients:** Yes  
- **Site English Spoken:** Y  
- **Site Languages(s) Spoken:** Spanish  
- **American Sign Language (ASL):**
### RAMONA

#### HOMESLEY, SUSAN, OD

<table>
<thead>
<tr>
<th>Provider Gender:</th>
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<tbody>
<tr>
<td>License Number:</td>
<td>6693</td>
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<tr>
<td>NPI:</td>
<td>1720068984</td>
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<td>Provider English Spoken:</td>
<td>Y</td>
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<tr>
<td>Spanish, Cultural Competency:</td>
<td>Y</td>
</tr>
<tr>
<td>SUSAN D HOMESLEY OD</td>
<td></td>
</tr>
<tr>
<td>1516 MAIN ST STE 102</td>
<td>RAMONA, CA 92065</td>
</tr>
<tr>
<td>Phone: (760) 789-0950</td>
<td>Fax: (760) 789-6057</td>
</tr>
<tr>
<td>After Hours Phone: (760) 789-0950</td>
<td></td>
</tr>
<tr>
<td>Accepting New Patients:</td>
<td>Yes</td>
</tr>
<tr>
<td>Site English Spoken:</td>
<td>Y</td>
</tr>
<tr>
<td>Site Languages(s) Spoken:</td>
<td>Spanish</td>
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<tr>
<td>American Sign Language (ASL):</td>
<td>N</td>
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<tr>
<td>Accessibility:</td>
<td>CONTACT PROVIDER</td>
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<tr>
<td>Public transportation (within 1/2 mile from Site):</td>
<td>1T</td>
</tr>
<tr>
<td>Hours:</td>
<td>M-TU 9:00AM-6:00PM W 10:00AM-7:00PM TH 9:00AM-6:00PM F 9:00AM-5:00PM</td>
</tr>
</tbody>
</table>

#### SAN DIEGO

#### ACKROYD, ARCHIE, OD

| Provider Gender: | Male |
| License Number:  | 4774   |
| NPI:             | 1629107172 |
| Provider English Spoken: | Y |
| Cultural Competency: | Y |
| VAN HOUSE OPTOMETRIC CORPORATION | |
| 7246 CLAIREMONT MESA BLVD | SAN DIEGO, CA 92111 |
| Phone: (858) 292-7193 | Fax: (858) 292-8247 |
| After Hours Phone: (858) 292-7193 |
| Accepting New Patients: | Yes |
| Site English Spoken: | Y |
| Site Languages(s) Spoken: | Spanish |
| American Sign Language (ASL): | N |
| Accessibility: | CONTACT PROVIDER |
| Public transportation (within 1/2 mile from Site): | 1U |
| Hours: | M-F 7:00AM-5:00PM |

#### AOTO, KIM, OD

| Provider Gender: | Female |
| License Number:  | 14524   |
| NPI:             | 1780935650 |
| Provider English Spoken: | Y |
| Spanish, Vietnamese, Cultural Competency: | Y |
| WEST COAST EYE CARE | |
| 4344 CONVOY ST STE C2 | SAN DIEGO, CA 92111 |
| Phone: (858) 565-8822 | Fax: (858) 565-2449 |
| After Hours Phone: (858) 565-8822 |
| Accepting New Patients: | Yes |
| Site English Spoken: | Y |
| American Sign Language (ASL): | N |
| Accessibility: | CONTACT PROVIDER |
| Public transportation (within 1/2 mile from Site): | 1U |
| Hours: | M 10:00AM-6:00PM TU 8:30AM-5:00PM W 7:30AM-4:00PM TH 9:30AM-5:00PM F 8:00AM-4:00PM |

#### AOTO, KIM, OD

| Provider Gender: | Female |
| License Number:  | 14524   |

2396
D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1780935650
Provider English Spoken: Y
Spanish, Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
Spanish, Vietnamese
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM
SA 8:30AM-2:00PM

BANSAL, PREETI, MD
Provider Gender: Female
License Number: A90890
NPI: 1871664631
Provider English Spoken: Y
Spanish
Cultural Competency: Y
Rady Childrens Specialists
7910 Frost St STE 200
San Diego, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
Tu 8:30AM-5:00PM
W 7:30AM-4:00PM
Th 9:30AM-5:00PM
F 8:00AM-4:00PM

ARCHIBALD, JOHN, OD
Provider Gender: Male
License Number: 11813
NPI: 1902893357
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
16615 Dove Canyon Rd
STE 105
San Diego, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
7:00AM-5:00PM

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

WEST COAST EYE CARE
4344 ConvoY St STE C2
San Diego, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM
Sa 8:30AM-2:00PM

BAUMANN, DANIELA, OD
Provider Gender: Female
License Number: 34530
NPI: 1982232146
Provider English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
8:00AM-5:00PM

2397
D7. 視力提供者目錄 - 眼科和視力服務

BERGMARK, JAMIE, OD
Provider Gender: Female
License Number: 33657
NPI: 1669920757
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
7:00AM-5:00PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

BINDER, NICHOLAS, MD
Provider Gender: Male
License Number: A124698
NPI: 1306076716
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

BOECK, CARL, OD
Provider Gender: Male
License Number: 6620
NPI: 1588656151
Provider English Spoken: Y
German, Spanish
Cultural Competency: Y
VAN HOOSE OPTOMETRIC CORPORATION
Phone: (858) 292-7193
Fax: (858) 292-8247
After Hours Phone: (858) 292-7193

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權，然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單，請造訪blueshieldca.com/fad。
### CAO, STEPHANIE, OD

<table>
<thead>
<tr>
<th>Provider Gender: Female</th>
<th>License Number: 35158</th>
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<tbody>
<tr>
<td>NPI: 1215660436</td>
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<tr>
<td>Provider English Spoken: Y</td>
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<td>Site English Spoken: Y</td>
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<td>American Sign Language (ASL): N</td>
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<td>Accessibility: CONTACT PROVIDER</td>
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**Public transportation (within 1/2 mile from Site): 1T**

**Hours:**
- M-F: 10:00AM-7:00PM
- SA: 10:00AM-7:00PM

<table>
<thead>
<tr>
<th>Phone: (619) 297-2020</th>
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<tbody>
<tr>
<td>After Hours Phone: (619) 295-2900</td>
</tr>
<tr>
<td>Fax: (888) 210-5799</td>
</tr>
</tbody>
</table>

#### OPTOMETR

- **5638 MISSION CENTER RD STE 103**
  - SAN DIEGO, CA 92108
  - Phone: (619) 295-2900
  - Fax: (888) 210-5799
  - After Hours Phone: (619) 295-2900

**Hours:**
- M-F: 10:00AM-7:00PM
- SA: 10:00AM-3:00PM

### CHAIN, PEI CHI, OD

<table>
<thead>
<tr>
<th>Provider Gender: Female</th>
<th>License Number: 34439</th>
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<tr>
<td>NPI: 1730676727</td>
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<td>Provider English Spoken: Y</td>
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<td>Site Languages(s) Spoken: Spanish, Chinese</td>
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<td>American Sign Language (ASL): N</td>
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<td>Accessibility: CONTACT PROVIDER</td>
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**Public transportation (within 1/2 mile from Site): 1U**

**Hours:**
- M-F: 9:00AM-5:30PM
- SA: 9:00AM-3:00PM

<table>
<thead>
<tr>
<th>Phone: (858) 250-0052</th>
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<tbody>
<tr>
<td>After Hours Phone: (858) 250-0052</td>
</tr>
<tr>
<td>Fax: (858) 788-0287</td>
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### CAO, STEPHANIE, OD

<table>
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<tr>
<th>Provider Gender: Female</th>
<th>License Number: 35158</th>
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<tbody>
<tr>
<td>NPI: 1215660436</td>
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<tr>
<td>Provider English Spoken: Y</td>
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<td>Site English Spoken: Y</td>
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<tr>
<td>Site Languages(s) Spoken: Spanish</td>
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<td>American Sign Language (ASL): N</td>
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<tr>
<td>Accessibility: CONTACT PROVIDER</td>
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</table>

**Public transportation (within 1/2 mile from Site): 1T**

**Hours:**
- M-TU: 9:00AM-5:00PM
- W: 10:00AM-6:00PM
- F: 9:00AM-5:00PM

### OPTOMETR

- **1555 PALM AVE STE A2**
  - SAN DIEGO, CA 92154
  - Phone: (619) 297-2020
  - Fax: (888) 210-5799
  - After Hours Phone: (619) 297-2020

**Hours:**
- M-TU: 9:00AM-5:00PM
- W: 10:00AM-6:00PM
- F: 9:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

SA 9:00AM-1:00PM

CHEN, LESLIE, OD
Provider Gender: Female
License Number: 12792
NPI: 1508953332
Provider English Spoken: Y
Chinese
Cultural Competency: Y
EYE STUDIO OPTOMETRY
4475 UNIVERSITY AVE
SAN DIEGO, CA 92105
Phone: (619) 521-2020
Fax: (619) 521-2025
After Hours Phone: (619) 521-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-W 9:00AM-5:00PM
TH 9:00AM-1:30PM
F 9:00AM-5:00PM
SA 9:00AM-1:00PM

COLEMAN, BROOKE, OD
Provider Gender: Female
License Number: 13551
NPI: 1700040748
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM
SA 8:30AM-2:00PM

COOPER, MICHAEL, OD
Provider Gender: Male
License Number: 10476
NPI: 1164586244
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9:00AM-5:30PM
SA 9:00AM-3:00PM

DAVIS, JADE, OD
Provider Gender: Female
License Number: 11765
NPI: 1457303398
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD
STE 103
SAN DIEGO, CA 92108
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone: (619) 295-2900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 9:00AM-5:30PM
SA 9:00AM-3:00PM

DAVIS, JADE, OD
Provider Gender: Female
License Number: 11765
NPI: 1457303398
Provider English Spoken: Y
Cultural Competency: Y
FASHION VALLEY EYE CARE OPTOMETRY
7007 FRIARS RD STE 351
SAN DIEGO, CA 92108
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone: (619)
D7. 視力提供者目錄 - 眼科和視力服務

291-2020
Accepting New Patients: Yes
- Site English Spoken: Y
- Site Languages(s) Spoken: Spanish
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
- Hours: M-F
  10:00AM-7:00PM
  SA 10:00AM-7:00PM

DEAN, MOENA, OD
Provider Gender: Female
License Number: 33955
NPI: 1265927578
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
- After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
- Site English Spoken: Y
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
- Hours: M-F
  7:00AM-5:00PM
  SA 8:30AM-2:00PM

DUONG, KIM, OD
Provider Gender: Female
License Number: 34222
NPI: 1114448651
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
RACY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
- After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
- Site English Spoken: Y
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
- Hours: M-F
  8:00AM-5:00PM
  SA 8:30AM-2:00PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
- After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
- Site English Spoken: Y
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
- Hours: M 10:00AM-6:00PM
  TU 8:30AM-5:00PM
  W 7:30AM-4:00PM
  TH 9:30AM-5:00PM
  F 8:00AM-4:00PM

EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
- After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
- Site English Spoken: Y
- American Sign Language (ASL): N
- Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
- Hours: M-F
  8:00AM-5:00PM
  SA 8:30AM-2:00PM

DYER, SHARON, OD
Provider Gender: Female
License Number: 33450
NPI: 1063866887

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參閱下方的清單。您可直接聯絡該等提供者。請注意,某些服務可能需要精神健康服務提供者獲得Blue Shield的事先授權,然後該服務才能獲得承保。
如欲線上獲取精神健康服務提供者清單,請造訪blueshieldca.com/fad。
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE  
6945 EL CAJON BLVD  
SAN DIEGO, CA 92115  
Phone: (619) 697-4600  
Fax: (619) 697-2410  
After Hours Phone: (619) 697-4600  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
Hours: M-F 9:00AM-5:00PM  
SA 9:00AM-1:00PM  

HO, HOANG, OD  
Provider Gender: Male  
License Number: 12582  
NPI: 1275684847  
Provider English Spoken: Y  
Cultural Competency: Y  
HEALTHY I CARE OPTOMETRY  
10737 CAMINO RUIZ STE 220  
SAN DIEGO, CA 92126  
Phone: (619) 590-1994  
Fax: (519) 590-9312  
After Hours Phone: (619) 590-1994  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F 8:00AM-4:00PM  

GIANG, STEVEN, OD  
Provider Gender: Male  
License Number: 34489  
NPI: 1730710104  
Provider English Spoken: Y  
Cultural Competency: Y  
JASMINE P NGUYEN OD INC  
4029 43RD ST STE 300  
SAN DIEGO, CA 92105  
Phone: (619) 284-3937  
Fax: (619) 284-3938  
After Hours Phone: (619) 284-3937  
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish, Vietnamese  
American Sign Language (ASL): N  

HO, AMIEE, OD  
Provider Gender: Female  
License Number: 14527  
NPI: 1396009478  
Provider English Spoken: Y  
Cultural Competency: Y  
UC SAN DIEGO HEALTH  
16950 VIA TAZON  
SAN DIEGO, CA 92127  
Phone: (858) 534-6290  
Fax: (858) 732-0921  
After Hours Phone: (858) 534-6290  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F 8:00AM-5:00PM  

HOANG, KEVIN, OD  
4060 4TH AVE STE 610  
SAN DIEGO, CA 92103  
Phone: (619) 543-6244  
Fax: (619) 295-5034  
After Hours Phone: (619) 543-6244  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F 8:00AM-5:00PM  

HOANG, KEVIN, OD
D7. 視力提供者目錄 - 眼科和視力服務

Provider Gender: Male
License Number: 34401
NPI: 1790339216
Provider English Spoken: Y
Spanish
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

HOM, GREGORY, OD
Provider Gender: Male
License Number: 9694
NPI: 1154473916
Provider English Spoken: Y
Cultural Competency: Y
GREGORY G HOM OD
11230 SORRENTO VLY RD
STE 145
SAN DIEGO, CA 92121
Phone: (858) 535-9835
Fax: (858) 535-1266
After Hours Phone: (858) 535-9835
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH
9:00AM-5:00PM
F 9:00AM-4:00PM

HUDSON, HENRY, MD
Provider Gender: Male
License Number: G76091
NPI: 1851349195
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
8:00AM-4:00PM
<table>
<thead>
<tr>
<th>Provider</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Accepting New Patients</th>
<th>Site Languages(s) Spoken</th>
<th>American Sign Language (ASL):</th>
<th>Accessibility:</th>
<th>Public transportation (within 1/2 mile from Site):</th>
<th>Hours</th>
<th>Site English Spoken:</th>
<th>Cultural Competency:</th>
</tr>
</thead>
<tbody>
<tr>
<td>HUYNH, LOAN, OD</td>
<td>10737 CAMINO RUIZ STE 100</td>
<td>(858) 549-3200</td>
<td>(858) 549-3207</td>
<td>(858) 549-3200</td>
<td>Yes</td>
<td>Tagalog, Spanish, Vietnamese</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>1U</td>
<td>Y</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>HUYNH, PAUL, MD</td>
<td>11835 CARMEL MTN RD STE 1313</td>
<td>(858) 674-1276</td>
<td>(858) 674-5863</td>
<td>(858) 674-1276</td>
<td>Yes</td>
<td>Tagalog</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>N</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>HUYNH, PAUL, MD</td>
<td>4060 4TH AVE STE 610</td>
<td>(619) 543-6244</td>
<td>(619) 295-5034</td>
<td>(619) 543-6244</td>
<td>Yes</td>
<td>Tagalog</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>Y</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>HUYNH, LOAN, OD</td>
<td>9225 MIRA MESA BLVD STE 108</td>
<td>(858) 547-3988</td>
<td>(844) 367-5161</td>
<td>(858) 547-3988</td>
<td>Yes</td>
<td>Tagalog, Vietnamese</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>1U</td>
<td>Y</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>HUYNH, PAUL, MD</td>
<td>11835 CARMEL MTN RD STE 1313</td>
<td>(858) 674-1276</td>
<td>(858) 674-5863</td>
<td>(858) 674-1276</td>
<td>Yes</td>
<td>Tagalog</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>N</td>
<td>Y</td>
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</tr>
<tr>
<td>HUYNH, PAUL, MD</td>
<td>4060 4TH AVE STE 610</td>
<td>(619) 543-6244</td>
<td>(619) 295-5034</td>
<td>(619) 543-6244</td>
<td>Yes</td>
<td>Tagalog</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>1T</td>
<td>Y</td>
<td>Y</td>
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</tr>
<tr>
<td>HUYNH, LOAN, OD</td>
<td>9225 MIRA MESA BLVD STE 108</td>
<td>(858) 547-3988</td>
<td>(844) 367-5161</td>
<td>(858) 547-3988</td>
<td>Yes</td>
<td>Tagalog, Vietnamese</td>
<td>N</td>
<td>CONTACT PROVIDER</td>
<td>1U</td>
<td>Y</td>
<td>Y</td>
<td></td>
</tr>
</tbody>
</table>
D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1871577056
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
ADVANCED EYE AND LASER
CTR OF CA INC

4844 UNIVERSITY AVE STE A
SAN DIEGO, CA 92105
Phone: (619) 283-1303
Fax: (619) 283-1666
After Hours Phone: (619) 283-1303
Accepting New Patients: Yes
Site English Spoken: Y
Cultural Competency: Y

WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y

KALBAKJI, NATALY, OD
Provider Gender: Female
License Number: 34943
NPI: 1700556438
Provider English Spoken: Y
Arabic
Cultural Competency: Y
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Spanish
Cultural Competency: Y
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

KATZMAN, BARRY, MD
Provider Gender: Male
License Number: A34834
NPI: 1760473797
Provider English Spoken: Y
Spanish
Cultural Competency: Y
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

KHALIGHI, PAYMAN, OD
Provider Gender: Male
License Number: 13014
NPI: 1396897880
Provider English Spoken: Y
Spanish
Cultural Competency: Y

JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N

Khieu, Tina, OD
Provider Gender: Female
License Number: 34777
NPI: 2406431178
Provider English Spoken: Y
Cultural Competency: Y

KHALIL, VADY, OD
Provider Gender: Male
License Number: 35137
NPI: 1275263584
Provider English Spoken: Y
Arabic
Cultural Competency: Y

WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N

Khan, Fahad, MD
Provider Gender: Male
License Number: A163142
NPI: 1548605843
Provider English Spoken: Y
Hindi
Cultural Competency: Y

VISION SPECIALISTS OF CALIFORNIA
233 LEWIS ST
SAN DIEGO, CA 92103
Phone: (619) 501-9050
Fax: (619) 501-9054
After Hours Phone: (619) 501-9050
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Bengali, Hindi, Spanish
American Sign Language (ASL): N

Khieu, Tina, OD
Provider Gender: Female
License Number: 34777
D7. 視力提供者目錄 - 眼科和視力服務

WEST COAST EYE CARE
NPI: 1962031617
Provider English Spoken: Y
Cultural Competency: Y
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-5:00PM
SA 8:30AM-2:00PM

KIM, PHILIP, OD
Provider Gender: Male
License Number: 33893
NPI: 1376929034
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 7:00AM-5:00PM

KHANDA, SUNEHA, OD
Provider Gender: Female
License Number: 35494
NPI: 1750066726
Provider English Spoken: Y
Cultural Competency: Y
EYELUX OPTOMETRY
16615 DOVE CANYON RD
STE 105
SAN DIEGO, CA 92127
Phone: (858) 487-7900
Fax: (858) 487-1896
After Hours Phone: (858) 487-7900
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-4:00PM

KLAREN, AMANDA, OD
Provider Gender: Female
License Number: 12617
NPI: 1396876611
Provider English Spoken: Y
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F 8:00AM-4:00PM

KULISCHAK, JOHN, OD
Provider Gender: Male
License Number: 9279
NPI: 1740205236
Provider English Spoken: Y
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 8:00AM-4:00PM

Your PCP's physician group may have its own network mental health service providers. Please refer to the list below. You can contact these providers directly. Note that some services may require mental health service providers to obtain prior authorization from Blue Shield before being covered.

To obtain a mental health provider list online, please visit blueshieldca.com/fad.
D7. 視力提供者目錄 - 眼科和視力服務

**LAM, ANNE, OD**  
Provider Gender: Female  
License Number: 12810  
NPI: 1174550768  
Provider English Spoken: Y  
Cultural Competency: Y  
HILLCREST EYE CENTER-UCSD  
4060 4TH AVE STE 610  
SAN DIEGO, CA 92103  
Phone: (619) 543-6244  
Fax: (619) 295-5034  
After Hours Phone: (619) 543-6244  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
Hours: M-F  
9:00AM-3:00PM  
SA 10:00AM-2:00PM

**LARSEN, STEVEN, OD**  
Provider Gender: Male  
License Number: 7687  
NPI: 1629194782  
Provider English Spoken: Y  
Spanish  
Cultural Competency: Y  
UPTOWN OPTOMETRY  
4096 PARK BLVD  
SAN DIEGO, CA 92103  
Phone: (619) 291-5505  
Fax: (619) 291-4404  
After Hours Phone: (619) 291-5505  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
Hours: M-F  
9:00AM-3:00PM  
SA 9:00AM-3:00PM

**LAU, KUEN CHINE, OD**  
Provider Gender: Male  
License Number: 11166  
NPI: 1821001645  
Provider English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
Hours: M-F  
8:00AM-4:00PM  
SA 10:00AM-2:00PM

**LAU, JANICE, OD**  
Provider Gender: Female  
License Number: 13037  
NPI: 1952453300  
Provider English Spoken: Y  
Cultural Competency: Y  
SABRE SPRINGS OPTOMETRY  
12650 SABRE SPGS PKWY  
STE 203  
SAN DIEGO, CA 92128  
Phone: (858) 748-1265  
Fax: (844) 269-9527  
After Hours Phone: (858) 748-1265  
Accepting New Patients: Yes
D7. 視力提供者目錄 - 眼科和視力服務

- **Site English Spoken:** Y  
  **Site Languages(s) Spoken:** Spanish, Vietnamese  
  **American Sign Language (ASL):** N  
- **Accessibility:** CONTACT PROVIDER  
- **Public transportation (within 1/2 mile from Site):** 1U  
- **Hours:** M-TU 9:00AM-5:00PM  
  W 10:00AM-6:00PM  
  TH 9:00AM-5:00PM  
  F 10:00AM-6:00PM

**LAU, KUEN CHINE, OD**  
**Provider Gender:** Male  
**License Number:** 11166  
**NPI:** 1821001645  
**Provider English Spoken:** Y  
**Cultural Competency:** Y  
**OPTOM-EYES VISION CARE OPTOMETRY**  
- **Address:** 1555 PALM AVE STE A2  
  SAN DIEGO, CA 92154  
- **Phone:** (619) 297-2020  
  **Fax:** (888) 210-5799  
- **After Hours Phone:** (619) 297-2020  
**Accepting New Patients:** Yes

**LEE, JASON, OD**  
**Provider Gender:** Male  
**License Number:** 14881  
**NPI:** 1679985584  
**Provider English Spoken:** Y  
**Cultural Competency:** Y  
**RADY CHILDREN'S SPECIALISTS**  
- **Address:** 7910 FROST ST STE 200  
  SAN DIEGO, CA 92123  
- **Phone:** (858) 309-7702  
  **Fax:** (858) 966-8901  
- **After Hours Phone:** (858) 309-7702  
**Accepting New Patients:** Yes

**LIN, HENRY, OD**  
**Provider Gender:** Male  
**License Number:** 11368  
**NPI:** 1861405664  
**Provider English Spoken:** Y  
**Cultural Competency:** Y  
**OPTOM-EYES VISION CARE OPTOMETRY**  
- **Address:** 5638 MISSION CENTER RD STE 103  
  SAN DIEGO, CA 92108  
- **Phone:** (619) 295-2900  
  **Fax:** (888) 210-5799  
- **After Hours Phone:** (619) 295-2900  
**Accepting New Patients:** Yes
### D7. 視力提供者目錄 - 眼科和視力服務

**LIN, HENRY, OD**
Provider Gender: Male  
License Number: 11368  
NPI: 1861405664  
Provider English Spoken: Y  
Spanish, Chinese  
Cultural Competency: Y  
FASHION VALLEY EYE CARE OPTOMETRY  
7007 FRIARS RD STE 351  
SAN DIEGO, CA 92108  
Phone: (619) 291-2020  
Fax: (888) 210-5799  
After Hours Phone: (619) 291-2020  
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
9:30AM-6:00PM  
SA 9:00AM-3:00PM

**LLANES, BENJAMIN, OD**
Provider Gender: Male  
License Number: 8782  
NPI: 1053309005  
Provider English Spoken: Y  
Spanish, Tagalog  
Cultural Competency: Y  
SEE KLEER EYECARE CENTER  
9580 BLACK MOUNTAIN RD STE J  
SAN DIEGO, CA 92126  
Phone: (858) 536-8952  
Fax: (858) 536-8951  
After Hours Phone: (858) 536-8952  
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish, Tagalog  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-F  
10:00AM-7:00PM  
SA 10:00AM-7:00PM

**LIN, HENRY, OD**
Provider Gender: Male  
License Number: 11368  
NPI: 1861405664  
Provider English Spoken: Y  
Spanish, Chinese  
Cultural Competency: Y  
OPTOM-EYES VISION CARE OPTOMETRY  
1555 PALM AVE STE A2  
SAN DIEGO, CA 92154  
Phone: (619) 297-2020  
Fax: (888) 210-5799  
After Hours Phone: (619) 297-2020  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
Hours: M-TH  
11:00AM-6:00PM  
F 1:00PM-5:00PM  
SA 9:00AM-1:00PM

**MARR, RYAN, OD**
Provider Gender: Male  
License Number: 35302  
NPI: 1235857525  
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE  
4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111  
Phone: (858) 565-8822  
Fax: (858) 565-2449  
After Hours Phone: (858) 565-8822  
Accepting New Patients: Yes  
Site English Spoken: Y  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
Hours: M 10:00AM-6:00PM  
TU 8:30AM-5:00PM  
W 7:30AM-4:00PM  
TH 9:30AM-5:00PM  
F 8:00AM-4:00PM

**MARR, RYAN, OD**
Provider Gender: Male  
License Number: 35302  
NPI: 1235857525  
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE  
6945 EL CAJON BLVD  
SAN DIEGO, CA 92115  
Phone: (619) 697-4600  
Fax: (619) 697-2410
D7. 視力提供者目錄 - 眼科和視力服務

- **MCCLEAN, ESMERALDA, OD**
  - Provider Gender: Female
  - License Number: 15001
  - NPI: 1962817981
  - Provider English Spoken: Y
  - Spanish
  - Cultural Competency: Y
  - Provider English Spoken: Y
  - Site English Spoken: Y
  - Accessibility: CONTACT PROVIDER
  - Public transportation (within 1/2 mile from Site): 1U
  - Hours: M 7:30AM-4:30PM
    - TU 8:00AM-5:00PM
    - W 8:30AM-5:00PM
    - TH 8:00AM-6:00PM
    - F 8:00AM-4:00PM

- **MCGRAW, JOSEPH, MD**
  - Provider Gender: Male
  - License Number: A155228
  - NPI: 1588624852
  - Provider English Spoken: Y
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Public transportation (within 1/2 mile from Site): 1U
  - Hours: M 7:30AM-4:30PM
    - TU 8:00AM-5:00PM
    - W 8:30AM-5:00PM
    - TH 8:00AM-6:00PM
    - F 8:00AM-4:00PM

- **MCGRAW, JOSEPH, MD**
  - License Number: A155228
  - NPI: 1588624852
  - Provider English Spoken: Y
  - Cultural Competency: Y
  - WEST COAST EYE CARE
  - 4344 CONVOY ST STE C2
    - SAN DIEGO, CA 92111
  - Phone: (858) 565-8822
  - Fax: (858) 565-2449
  - After Hours Phone: (858) 565-8822
  - Accepting New Patients: Yes
  - Site English Spoken: Y
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Public transportation (within 1/2 mile from Site): 1U
  - Hours: M 10:00AM-6:00PM
    - TU 8:30AM-5:00PM
    - W 7:30AM-4:00PM
    - TH 9:30AM-5:00PM
    - F 8:00AM-4:00PM

- **MIZOGUCHI, LIANNE, OD**
  - Provider Gender: Female
  - License Number: 10104
  - NPI: 1619900313
  - Provider English Spoken: Y
  - Cultural Competency: Y
  - HILLCREST EYE CENTER-UCSD
  - 4060 4TH AVE STE 610
    - SAN DIEGO, CA 92103
  - Phone: (619) 543-6244
  - Fax: (619) 295-5034
  - After Hours Phone: (619) 543-6244
  - Accepting New Patients: Yes
  - Site English Spoken: Y
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Public transportation (within 1/2 mile from Site): 1U
  - Hours: M-F
    - 8:00AM-4:00PM

- **MOLL, ANGELA, MD**
  - Provider Gender: Female
  - License Number: A105472
  - NPI: 1861648602
  - Provider English Spoken: Y
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Public transportation (within 1/2 mile from Site): 1U
  - Hours: M 7:30AM-4:30PM
    - TU 8:00AM-5:00PM
    - W 8:30AM-5:00PM
    - TH 8:00AM-6:00PM
    - F 8:00AM-4:00PM

- **MIZOGUCHI, LIANNE, OD**
  - HILLCREST EYE CENTER-UCSD
  - 4060 4TH AVE STE 610
    - SAN DIEGO, CA 92103
  - Phone: (619) 543-6244
  - Fax: (619) 295-5034
  - After Hours Phone: (619) 543-6244
  - Accepting New Patients: Yes
  - Site English Spoken: Y
  - American Sign Language (ASL): N
  - Accessibility: CONTACT PROVIDER
  - Public transportation (within 1/2 mile from Site): 1U
  - Hours: M-F
    - 8:00AM-4:00PM
D7. 視力提供者目錄 - 眼科和視力服務

Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
 prizes
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

Hours: M-F
8:00AM-4:00PM

MOOR, TRACY, OD
Provider Gender: Female
License Number: 35085
NPI: 1184283277
Provider English Spoken: Y
Cultural Competency: Y

UC SAN DIEGO HEALTH
16950 VIA TAZON
SAN DIEGO, CA 92127
Phone: (858) 534-6290
Fax: (858) 732-0921
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Indonesian, Spanish
Cultural Competency: Y

HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

Hours: M-F
8:00AM-5:00PM

MORRISON REYES, JOSHUA, MD
Provider Gender: Male
License Number: A125435
NPI: 1235366782
Provider English Spoken: Y
Indonesian, Spanish
Cultural Competency: Y

WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
D7. 視力提供者目錄 - 眼科和視力服務

NGUYEN, KELVIN, OD
Provider Gender: Male  
License Number: 11085  
NPI: 1518923572  
Provider English Spoken: Y  
Spanish  
Cultural Competency: Y  
SAN DIEGO VISION CARE OPTOMETRY  
3807 FAIRMOUNT AVE STE 200  
SAN DIEGO, CA 92105  
📞 Phone: (619) 508-5678  
Fax: (619) 501-0686  
⏰ After Hours Phone: (619) 508-5678  
Accepting New Patients: Yes  
分からない言語: Y  
Spanish, Vietnamese  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
⏰ Hours: M-F 9:00AM-5:00PM  
SA 9:00AM-1:00PM

NGUYEN, HOA PHUONG, OD
Provider Gender: Female  
License Number: 12630  
NPI: 1962439265  
Provider English Spoken: Y  
Vietnamese  
Cultural Competency: Y  
COLLEGE GROVE OPTOMETRY  
4560 COLLEGE AVE  
SAN DIEGO, CA 92115  
📞 Phone: (619) 583-5744  
Fax: (619) 582-6112  
⏰ After Hours Phone: (619) 583-5744  
Accepting New Patients: Yes  
分からない言語: Y  
Spanish, Vietnamese  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
⏰ Hours: M-F 9:00AM-5:00PM

NGUYEN, THANH, OD
Provider Gender: Female  
License Number: 13126  
NPI: 1992813323  
Provider English Spoken: Y  
Vietnamese  
Cultural Competency: Y  
JASMINE P NGUYEN OD INC  
4029 43RD ST STE 300  
SAN DIEGO, CA 92105  
📞 Phone: (619) 284-3937  
Fax: (619) 284-3938  
⏰ After Hours Phone: (619) 284-3937  
Accepting New Patients: Yes  
分からない言語: Y  
Spanish, Vietnamese  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
⏰ Hours: M-F 9:00AM-5:00PM

NGUYEN, BRUCE, OD
Provider Gender: Male  
License Number: 14156  
NPI: 1376839019  
Provider English Spoken: Y  
Vietnamese  
Cultural Competency: Y  
CLAIREMONT OPTOMETRY  
10715 TIERRASANTA BLVD STE F  
SAN DIEGO, CA 92124  
📞 Phone: (619) 284-3937  
Fax: (619) 284-3938  
⏰ After Hours Phone: (619) 284-3937  
Accepting New Patients: Yes  
分からない言語: Y  
Spanish, Vietnamese  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
⏰ Hours: M-F 9:00AM-5:00PM

您的PCP的醫生團體可能有自己的網絡內精神健康服務提供者。請參阅下方的清單。您可直接聯絡該等提供者。請注意，某些服務可能需要精神健康服務提供者獲得 Blue Shield 的事先授權，然後該服務才能獲得承保。如欲線上獲取精神健康服務提供者清單，請造訪 blueshieldca.com/fad。
D7. 視力提供者目錄 - 眼科和視力服務

Phone: (858) 279-6500
Fax: (858) 225-7174
After Hours Phone: (858) 279-6500
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-TU 9:00AM-5:00PM
W 10:00AM-6:00PM
TH 9:00AM-5:00PM
F 10:00AM-6:00PM

NGUYEN, THANH, OD
Provider Gender: Female
License Number: 13126
NPI: 1992813323
Provider English Spoken: Y Vietnamese
Cultural Competency: Y
SABRE SPRINGS OPTOMETRY
12650 SABRE SPGS PKWY STE 203
SAN DIEGO, CA 92128
Phone: (858) 748-1265
Fax: (844) 269-9527
After Hours Phone: (858) 748-1265
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM
SA 8:00AM-3:00PM

O HALLORAN, HENRY, MD
Provider Gender: Male
License Number: A73282
NPI: 1235287947
Provider English Spoken: Y
German, Spanish
Cultural Competency: Y
RADY CHILDRENS SPECIALISTS
7910 FROST ST STE 200
SAN DIEGO, CA 92123
Phone: (858) 309-7702
Fax: (858) 966-8901
After Hours Phone: (858) 309-7702
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

PATIL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
D7. 眼科和視力服務

PATEL, GITANE, MD
Provider Gender: Male
License Number: A108603
NPI: 1710171434
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

PHUNG, RICHARD N V, OD
Provider Gender: Male
License Number: 9547
NPI: 1689661571
Provider English Spoken: Y
Vietnamese, Chinese
Cultural Competency: Y
SCRIPPS RANCH OPTOMETRIC CTR
9880 HIBERT ST STE E1
SAN DIEGO, CA 92131
Phone: (858) 693-9044
Fax: (858) 693-0704
After Hours Phone: (858) 693-9044
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
TU 10:00AM-2:00PM
W-TH 10:00AM-6:00PM
F 9:00AM-2:00PM
SA 9:00AM-2:00PM

PATEL, SARJAN, MD
Provider Gender: Male
License Number: A114976
NPI: 1316199326
Provider English Spoken: Gujarati, Hindi, Spanish
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 7:30AM-4:30PM
TU 8:00AM-5:00PM
W 8:30AM-5:00PM
TH 8:00AM-6:00PM
F 8:00AM-4:00PM

POUSTI, SHEIVA, OD
Provider Gender: Female
License Number: 10403
NPI: 1730240052
Provider English Spoken: Y

TRANSLATION:

Your PCP’s clinician network may have their own mental health provider network. Please see the below list of providers. You can contact these providers directly. Please note, some services may need the mental health provider to obtain prior authorization from Blue Shield for the service to be covered.

You can online the mental health provider list at blueshieldca.com/fad.
Cultural Competency: Y
SAN DIEGO EYE CLINIC
OPTOMETRY
ี้ 3560 FAIRMOUNT AVE STE A
SAN DIEGO, CA 92105
⃣ Phone: (619) 431-2020
Fax: (619) 376-2100
⃣ After Hours Phone: (619) 431-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
.Provider Gender: Female
License Number: A115965
NPI: 1982872552
Provider English Spoken: Y
Spanish
Cultural Competency: Y
WEST COAST EYE CARE
ี้ 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
⃣ Phone: (858) 565-8822
Fax: (858) 565-2449
⃣ After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
.Provider Gender: Female
License Number: 13535
NPI: 1992969794
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
ี้ 5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
⃣ Phone: (619) 295-2900
Fax: (888) 210-5799
⃣ After Hours Phone: (619) 295-2900
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
.Provider Gender: Female
License Number: 110965
NPI: 1982872552
Provider English Spoken: Y
Spanish
Cultural Competency: Y
WEST COAST EYE CARE
ี้ 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
⃣ Phone: (619) 697-4600
Fax: (619) 697-2410
⃣ After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
.Provider Gender: Female
License Number: 13535
NPI: 1992969794
Provider English Spoken: Y
NORTH COUNTY OPTOMETRY
ี้ 11835 CARMEL MTN RD STE 1313
SAN DIEGO, CA 92128
⃣ Phone: (858) 674-1276
Fax: (858) 674-5863
⃣ After Hours Phone: (858) 674-1276
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): Tagalog
D7. 視力提供者目錄 - 眼科和視力服務

American Sign Language (ASL):
N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

SOLIS, KEVIN, OD
Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
5638 MISSION CENTER RD STE 103
SAN DIEGO, CA 92108
Phone: (619) 295-2900
Fax: (888) 210-5799
After Hours Phone: (619) 295-2900
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

SOLIS, KEVIN, OD
Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y
FASHION VALLEY EYE CARE OPTOMETRY
7007 FRIARS RD STE 351
SAN DIEGO, CA 92108
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone: (619) 291-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

SOLIS, KEVIN, OD
Provider Gender: Male
License Number: 10420
NPI: 1538362116
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
Phone: (619) 297-2020
Fax: (888) 210-5799
After Hours Phone: (619) 297-2020
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

TA, TRANG, OD
Provider Gender: Female
License Number: 12100
NPI: 1518381045
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

TAM, MAY, OD
Provider Gender: Female
License Number: 11960
D7. 視力提供者目錄 - 眼科和視力服務

NPI: 1548255896
Provider English Spoken: Y
Spanish
Cultural Competency: Y
FASHION VALLEY EYE CARE
OPTOMETR
7007 FRIARS RD STE 351
SAN DIEGO, CA 92108
Phone: (619) 291-2020
Fax: (888) 210-5799
After Hours Phone: (619) 291-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
9:00AM-5:30PM
SA 9:00AM-3:00PM

TAM, MAY, OD
Provider Gender: Female
License Number: 11960
NPI: 1548255896
Provider English Spoken: Y
Spanish
Cultural Competency: Y
OPTOM-EYES VISION CARE
OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
Phone: (619) 297-2020
Fax: (888) 210-5799
After Hours Phone: (619) 297-2020
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
9:00AM-6:00PM
SA 9:00AM-3:00PM

TILLMAN, SYLVIA, OD
Provider Gender: Female
License Number: 9726
NPI: 1174730824
Provider English Spoken: Y
Spanish
Cultural Competency: Y
JASMINE P NGUYEN OD INC
4029 43RD ST STE 300
SAN DIEGO, CA 92105
Phone: (619) 284-3937
Fax: (619) 284-3938
After Hours Phone: (619) 284-3937
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F
9:00AM-5:00PM
SA 9:00AM-1:00PM

TON-NU, MY LINH, OD
Provider Gender: Female
License Number: 34990
NPI: 1245733476
Provider English Spoken: Y
Cultural Competency: Y
WEST COAST EYE CARE
6945 EL CAJON BLVD
SAN DIEGO, CA 92115
Phone: (619) 697-4600
Fax: (619) 697-2410
After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
D7. 視力提供者目錄 - 眼科和視力服務

American Sign Language (ASL): N
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
 })). 4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
 Phone: (858) 565-8822
 Fax: (858) 565-2449
 After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
 TU 8:30AM-5:00PM
 W 7:30AM-4:00PM
 TH 9:30AM-5:00PM
 F 8:00AM-4:00PM

TONNU, ANH, OD
Provider Gender: Female
License Number: 11318
NPI: 1679521280
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
WEST COAST EYE CARE
 })). 6945 EL CAJON BLVD
SAN DIEGO, CA 92115
 Phone: (619) 697-4600
 Fax: (619) 697-2410
 After Hours Phone: (619) 697-4600
Accepting New Patients: Yes
Site English Spoken: Y
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
 7:00AM-5:00PM

TRANG, CHAU, OD
Provider Gender: Female
License Number: 9556
NPI: 1073671087
Provider English Spoken: Y
French, Spanish, Vietnamese,
Chinese
Cultural Competency: Y
CHAU H TRANG OD
6947 LINDA VISTA RD STE A
SAN DIEGO, CA 92111
Phone: (858) 495-0592
Fax: (858) 495-0560
After Hours Phone: (858) 495-0592
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: French, Spanish, Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-F 9:30AM-6:00PM
SA 9:00AM-3:00PM

VAN HOOSE, MARC, OD
Provider Gender: Male
License Number: 12667
NPI: 1932280054
Provider English Spoken: Y Spanish
Cultural Competency: Y
VAN HOUSE OPTOMETRIC CORPORATION
7246 CLAIREMONT MESA BLVD
SAN DIEGO, CA 92111
Phone: (858) 292-7193
Fax: (858) 292-8247
After Hours Phone: (858) 292-7193
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
TU-TH 9:00AM-6:00PM
F 8:00AM-4:00PM

TU, CHARLES, OD
Provider Gender: Male
License Number: 34618
NPI: 1073137691
Provider English Spoken: Y
Cultural Competency: Y
OPTOM-EYES VISION CARE OPTOMETRY
1555 PALM AVE STE A2
SAN DIEGO, CA 92154
Phone: (619) 297-2020
Fax: (888) 210-5799
After Hours Phone: (619) 297-2020
Accepting New Patients: Yes
Site English Spoken: Y

WEST COAST EYE CARE
4344 CONVOY ST STE C2
SAN DIEGO, CA 92111
Phone: (858) 565-8822
Fax: (858) 565-2449
After Hours Phone: (858) 565-8822
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M 10:00AM-6:00PM
TU 8:30AM-5:00PM
W 7:30AM-4:00PM
TH 9:30AM-5:00PM
F 8:00AM-4:00PM

VO, ANDREW MINH, OD
Provider Gender: Male
License Number: 33869
NPI: 1790291565
Provider English Spoken: Y Vietnamese
Cultural Competency: Y
HILLCREST EYE CENTER-UCSD
4060 4TH AVE STE 610
SAN DIEGO, CA 92103
Phone: (619) 543-6244
Fax: (619) 295-5034
After Hours Phone: (619) 543-6244
Accepting New Patients: Yes
D7. 視力提供者目錄 - 眼科和視力服務

- **Site English Spoken:** Y
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Public transportation (within 1/2 mile from Site):** 1T
- **Hours:** M-F 8:00AM-4:00PM

**YU, CAROL, OD**  
Provider Gender: Female  
License Number: 34047  
NPI: 1639697451  
Provider English Spoken: Y  
Spanish, Chinese  
Cultural Competency: Y  
HILLCREST EYE CENTER-UCSD  
4060 4TH AVE STE 610  
SAN DIEGO, CA 92103  
Phone: (619) 543-6244  
Fax: (619) 295-5034  
After Hours Phone: (619) 543-6244  
Accepting New Patients: Yes

- **Site English Spoken:** Y
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Public transportation (within 1/2 mile from Site):** 1U  
- **Hours:** M 10:00AM-6:00PM  
  TU 8:30AM-5:00PM  
  W 7:30AM-4:00PM  
  TH 9:30AM-5:00PM  
  F 8:00AM-4:00PM

**GUAN, HOWARD, MD**  
Provider Gender: Male  
License Number: A119766  
NPI: 1134427636  
Provider English Spoken: Y  
Spanish, Chinese  
Cultural Competency: Y  
RSF OPHTHALMOLOGY  
100 N RANCHO SANTA FE RD STE 12  
SAN MARCOS, CA 92069  
Phone: (760) 598-0400  
Fax: (760) 249-7394  
After Hours Phone: (760) 598-0400  
Accepting New Patients: Yes

- **Site English Spoken:** Y  
  - Site Languages(s) Spoken: Spanish, Thai  
  - **American Sign Language (ASL):** N  
  - **Accessibility:** CONTACT PROVIDER  
  - **Public transportation (within 1/2 mile from Site):** 1T  
  - **Hours:** M-F 8:00AM-5:00PM

**PRESTERA, TORY, MD**  
Provider Gender: Male  
License Number: A62321  
NPI: 1346224557

- **Site English Spoken:** Y
  - Site Languages(s) Spoken: Spanish, Thai  
  - **American Sign Language (ASL):** N  
  - **Accessibility:** CONTACT PROVIDER  
  - **Public transportation (within 1/2 mile from Site):** 1T  
  - **Hours:** M-F 8:00AM-5:00PM

**SAN MARCOS**

**GARFF, KEVIN, MD**  
Provider Gender: Male  
License Number: A160988  
NPI: 1609258920  
Provider English Spoken: Y  
Spanish  
Cultural Competency: Y  
RSF OPHTHALMOLOGY  
100 N RANCHO SANTA FE RD STE 12  
SAN MARCOS, CA 92069  
Phone: (760) 598-0400  
Fax: (760) 249-7394  
After Hours Phone: (760) 598-0400  
Accepting New Patients: Yes

- **Site English Spoken:** Y  
  - Site Languages(s) Spoken: Spanish, Thai

**PRESTERA, TORY, MD**  
Provider Gender: Male  
License Number: A62321  
NPI: 1346224557

- **Site English Spoken:** Y
  - Site Languages(s) Spoken: Spanish, Thai

**ƯU, CAROL, OD**  
Provider Gender: Female  
License Number: 34047  
NPI: 1639697451  
Provider English Spoken: Y  
Spanish, Chinese  
Cultural Competency: Y  
HILLCREST EYE CENTER-UCSD  
4060 4TH AVE STE 610  
SAN DIEGO, CA 92103  
Phone: (619) 543-6244  
Fax: (619) 295-5034  
After Hours Phone: (619) 543-6244  
Accepting New Patients: Yes

- **Site English Spoken:** Y
- **American Sign Language (ASL):** N
- **Accessibility:** CONTACT PROVIDER
- **Public transportation (within 1/2 mile from Site):** 1T
- **Hours:** M-F 8:00AM-4:00PM
D7. 視力提供者目錄 - 眼科和視力服務

Provider English Spoken: Y  
Spanish  
Cultural Competency: Y

RSF OPHTHALMOLOGY
100 N RANCHO SNTA FE RD STE 12  
SAN MARCOS, CA 92069
☎ Phone: (760) 598-0400  
Fax: (760) 249-7394
⚠ After Hours Phone: (760) 598-0400
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish, Thai
American Sign Language (ASL): N
☎ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
⏰ Hours: M-F 9:00AM-5:00PM

TA, MINI, OD  
Provider Gender: Female  
License Number: 15170  
NPI: 1578955605
Provider English Spoken: Y  
Cultural Competency: Y

NEW OPTIX OPTOMETRY  
640 GRAND AVE STE 101  
SAN MARCOS, CA 92078
☎ Phone: (760) 736-0020  
Fax: (760) 736-0019
⚠ After Hours Phone: (760) 736-0020
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
☎ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
⏰ Hours: M 9:00AM-5:00PM  
TU 9:00AM-6:00PM  
W 9:00AM-5:00PM  
TH 9:00AM-6:00PM  
F 9:00AM-5:00PM

TRAN, MICHAEL, OD  
Provider Gender: Male  
License Number: 14530  
NPI: 1649524216
Provider English Spoken: Y  
Vietnamese  
Cultural Competency: Y

NEW OPTIX OPTOMETRY  
640 GRAND AVE STE 101  
SAN MARCOS, CA 92078
☎ Phone: (760) 736-0020  
Fax: (760) 736-0019
⚠ After Hours Phone: (760) 736-0020
Accepting New Patients: Yes  
Site English Spoken: Y  
Site Languages(s) Spoken: Spanish, Vietnamese
American Sign Language (ASL): N
D7. 視力提供者目錄 - 眼科和視力服務

N
 Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

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<th>Provider</th>
<th>Gender</th>
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<th>NPI</th>
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<th>Site Language(s) Spoken</th>
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<tbody>
<tr>
<td>JOHNSON, CHRISTOPHER, OD</td>
<td>Male</td>
<td>License Number: 15100</td>
<td>NPI: 1568861425</td>
<td>(619) 463-9318</td>
<td>(619) 463-9640</td>
<td>(619) 463-9318</td>
<td>Yes</td>
<td>Arabic, Spanish</td>
<td>Y</td>
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<tr>
<td>KALRA, ANKUR, OD</td>
<td>Male</td>
<td>License Number: 11898</td>
<td>NPI: 1124195789</td>
<td>(619) 466-9444</td>
<td>(619) 466-9314</td>
<td>(619) 466-9444</td>
<td>Yes</td>
<td>Hindi</td>
<td>Y</td>
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<td>KEDDINGTON, JOAN, OD</td>
<td>Female</td>
<td>License Number: 6263</td>
<td>NPI: 1992872691</td>
<td>(619) 466-9444</td>
<td>(619) 466-9314</td>
<td>(619) 466-9444</td>
<td>Yes</td>
<td>Spanish</td>
<td>Y</td>
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Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U

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<th>Provider Telephone</th>
<th>Fax</th>
<th>After Hours Phone</th>
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<tbody>
<tr>
<td>FLEMING, JOHN, OD</td>
<td>Male</td>
<td>License Number: 8461</td>
<td>NPI: 1033192133</td>
<td>(619) 463-9318</td>
<td>(619) 463-9640</td>
<td>(619) 463-9318</td>
<td>Yes</td>
<td>English, Spanish</td>
<td>Y</td>
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<tr>
<td>HOANG, KENNY, OD</td>
<td>Male</td>
<td>License Number: 35207</td>
<td>NPI: 1740868603</td>
<td>(619) 463-9318</td>
<td>(619) 463-9640</td>
<td>(619) 463-9318</td>
<td>Yes</td>
<td>English</td>
<td>Y</td>
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Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T

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<th>Gender</th>
<th>License Number</th>
<th>NPI</th>
<th>Provider Telephone</th>
<th>Fax</th>
<th>After Hours Phone</th>
<th>Accepting New Patients</th>
<th>Site Language(s) Spoken</th>
<th>Cultural Competency: Y</th>
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<tbody>
<tr>
<td>JOHN C FLEMING OD</td>
<td>Male</td>
<td>License Number: 9628 CAMPO RD STE C</td>
<td>SPRING VALLEY, CA 91977</td>
<td>Phone: (619) 463-9318</td>
<td>Fax: (619) 463-9640</td>
<td>(619) 463-9318</td>
<td>Yes</td>
<td>Hindi</td>
<td>Y</td>
</tr>
<tr>
<td>JOHNSON, CHRISTOPHER, OD</td>
<td>Male</td>
<td>License Number: 15100</td>
<td>NPI: 1568861425</td>
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<td>(619) 463-9640</td>
<td>(619) 463-9318</td>
<td>Yes</td>
<td>Arabic, Spanish</td>
<td>Y</td>
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<td>Male</td>
<td>License Number: 11898</td>
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<td>(619) 466-9314</td>
<td>(619) 466-9444</td>
<td>Yes</td>
<td>Hindi</td>
<td>Y</td>
</tr>
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<td>Female</td>
<td>License Number: 6263</td>
<td>NPI: 1992872691</td>
<td>(619) 466-9444</td>
<td>(619) 466-9314</td>
<td>(619) 466-9444</td>
<td>Yes</td>
<td>Spanish</td>
<td>Y</td>
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</tbody>
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American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

NGUYEN, THERESA, OD
Provider Gender: Female
License Number: 35530TLG
NPI: 1609555713
Provider English Spoken: Y
Cultural Competency: Y

TOUBIA, ELIAS, OD
Provider Gender: Male
License Number: 33758
NPI: 1740701481
Provider English Spoken: Y
Arabic
Cultural Competency: Y

SOLIS, KEVIN, OD
Provider Gender: Male
License Number: 10420
NPI: 1538362116
D7. 視力提供者目錄 - 眼科和視力服務

Arabic, Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
👀 Hours: M-F
9:00AM-6:00PM
SA 9:00AM-5:00PM

VALLEY CENTER

GRASSO, GINA, OD
Provider Gender: Female
License Number: 11139TLG
NPI: 1700899952
Provider English Spoken: Y
Cultural Competency: Y
VALLEY CENTER OPTOMETRY
29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082
☎ Phone: (760) 751-8771
Fax: (760) 751-8772
✉ After Hours Phone: (760) 751-8771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
👀 Hours: M 9:00AM-6:00PM
TU-F 9:00AM-5:00PM

LE, TAM, OD
Provider Gender: Female
License Number: 11833
NPI: 1275585127
Provider English Spoken: Y
Spanish
Cultural Competency: Y
VALLEY CENTER OPTOMETRY
29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082
☎ Phone: (760) 751-8771
Fax: (760) 751-8772
✉ After Hours Phone: (760) 751-8771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
👀 Hours: M 9:00AM-6:00PM
TU-F 9:00AM-5:00PM

JOYCE, ROBERT, OD
Provider Gender: Male
License Number: 11833
NPI: 1275585127
Provider English Spoken: Y
Spanish
Cultural Competency: Y
VALLEY CENTER OPTOMETRY
29115 VALLEY CENTER RD
STE E
VALLEY CENTER, CA 92082
☎ Phone: (760) 751-8771
Fax: (760) 751-8772
✉ After Hours Phone: (760) 751-8771
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
👀 Hours: M 9:00AM-6:00PM
TU-F 9:00AM-5:00PM

VISTA

DEMLINGER, GLENN, OD
Provider Gender: Male
License Number: 11833
NPI: 1275585127
Provider English Spoken: Y
Spanish
Cultural Competency: Y
SHADOWRIDGE FAMILY VISION
741 SHADOWRIDGE DR
VISTA, CA 92083
☎ Phone: (760) 727-1844
Fax: (760) 727-3044
✉ After Hours Phone: (760) 727-1844
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1U
👀 Hours: M 9:00AM-6:00PM
W 7:00AM-5:00PM
D7. 視力提供者目錄 - 眼科和視力服務

GEORGE, BRUCE, OD
Provider Gender: Male
License Number: 7696
NPI: 1356414551
Provider English Spoken: Y
Korean, Spanish
Cultural Competency: Y
BRUCE D GEORGE OD
931 ANZA AVE STE B
VISTA, CA 92084
Phone: (760) 758-2340
Fax: (760) 867-2222
After Hours Phone: (760) 758-2340
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM

GEORGE, KENDALL, OD
Provider Gender: Male
License Number: 34270
NPI: 1619529948
Provider English Spoken: Y
Spanish
Cultural Competency: Y
BRUCE D GEORGE OD
931 ANZA AVE STE B
VISTA, CA 92084
Phone: (760) 758-2340
Fax: (760) 867-2222
After Hours Phone: (760) 758-2340
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Spanish
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M 9:00AM-5:00PM
TU-W 9:00AM-6:00PM
TH-F 9:00AM-5:00PM

TRAN, THAO, OD
Provider Gender: Female
License Number: 12867
NPI: 1962581421
Provider English Spoken: Y
Vietnamese
Cultural Competency: Y
KINDERSPECS-GOOD EYES OPTOMETRY
110 CIVIC CENTER DR STE 204
VISTA, CA 92084
Phone: (760) 753-3665
Fax: (408) 969-1653
After Hours Phone: (760) 753-3665
Accepting New Patients: Yes
Site English Spoken: Y
Site Languages(s) Spoken: Vietnamese
American Sign Language (ASL): N
Accessibility: CONTACT PROVIDER
Public transportation (within 1/2 mile from Site): 1T
Hours: M-TH 10:00AM-5:00PM
D8. 其他服務提供者

SAN MARCOS
AMERICARE ADULT DAY HEALTH CARE CENTER
License Number: 060000832
340 RANCHEROS DR STE 196
SAN MARCOS, CA 92069
Phone: (760) 682-2424
After Hours Phone: (760) 682-2424
Site English Spoken: Y
Accessibility: CONTACT PROVIDER
Website: www.americareadhc.com
Cultural Competency: N
Accepting New Patients: No
D9. Blue Shield Promise 緊急護理設施

CHULA VISTA

AFC URGENT CARE OF BONITA*
NPI: 1316225147
〒 760 OTAY LAKES RD
CHULA VISTA, CA 91910
📞 (619) 821-2300
📞 (619) 821-2300
_site Languages(s) Spoken: Spanish
📅 SU 8:00AM-5:00PM
📅 M-F 8:00AM-8:00PM
📅 SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
🌐 www.afcurgentcare.com/chula-vista/
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*
NPI: 1558788620
〒 8590 RIO SAN DIEGO DR STE 111
SAN DIEGO, CA 92108
📞 (619) 736-4600
📞 (619) 736-4600
📅 SU-SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
🌐 https://www.afcurgentcare.com/san-diego/
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*
NPI: 1952995466
〒 8590 RIO SAN DIEGO DR STE 111
SAN DIEGO, CA 92108
📞 (619) 736-4600

AFC URGENT CARE OF SAN DIEGO*
NPI: 1558788620
〒 1740 ROSECRANS ST
SAN DIEGO, CA 92106
📞 (619) 790-7800
📞 (619) 790-7800
📅 SU-SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
🌐 https://www.afcurgentcare.com/san-diego/
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*
NPI: 1952995466
〒 1740 ROSECRANS ST
SAN DIEGO, CA 92106
📞 (619) 790-7800
📞 (619) 790-7800
📅 SU-SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
🌐 https://www.afcurgentcare.com/san-diego/
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*
NPI: 1952995466
〒 1740 ROSECRANS ST
SAN DIEGO, CA 92106
📞 (619) 790-7800
📞 (619) 790-7800
📅 SU-SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
🌐 https://www.afcurgentcare.com/san-diego/
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*
NPI: 1558788620
〒 1740 ROSECRANS ST
SAN DIEGO, CA 92106
📞 (619) 790-7800
📞 (619) 790-7800
📅 SU-SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
🌐 https://www.afcurgentcare.com/san-diego/
Accepting New Patients: No

AFC URGENT CARE OF SAN DIEGO*
NPI: 1952995466
〒 5671 BALBOA AVE
SAN DIEGO, CA 92111
📞 (858) 800-2880
📞 (858) 800-2880

AFC URGENT CARE OF SAN DIEGO*
NPI: 1558788620
〒 5671 BALBOA AVE
SAN DIEGO, CA 92111
📞 (858) 800-2880

AFC URGENT CARE OF SAN DIEGO*
NPI: 1952995466
〒 5671 BALBOA AVE
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📞 (858) 800-2880

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AFC URGENT CARE OF SAN DIEGO*
NPI: 1558788620
〒 5671 BALBOA AVE
SAN DIEGO, CA 92111
📞 (858) 800-2880

AFC URGENT CARE OF SAN DIEGO*
NPI: 1952995466
〒 5671 BALBOA AVE
SAN DIEGO, CA 92111
📞 (858) 800-2880
D9. Blue Shield Promise

緊急護理設施

(858) 800-2880
SU-SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
https://www.afcurgentcare.com/san-diego/
Accepting New Patients: No

SANTEE
AFC URGENT CARE OF SANTEE*
NPI: 1396058137
10538 MISSION GORGE RD
STE 100
SANTEE, CA 92071
(619) 456-0033
(619) 456-0033
Site Languages(s) Spoken: Arabic, Spanish
SU-SA 8:00AM-8:00PM
Accessibility: CONTACT PROVIDER
www.afcurgentcare.com/santee/
Accepting New Patients: No

CHULA VISTA
Rady Childrens Specialists San Diego Med FNDTN*
NPI: 1669617197
386 E H ST STE 202
CHULA VISTA, CA 91910
(858) 966-8133
(858) 966-8133
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No

Rady Childrens Specialists San Diego Med FNDTN*
NPI: 1669617197
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Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No
D9. Blue Shield Promise 緊急護理設施

PROVIDER
N/A
Accepting New Patients: No

Rady Childrens
Specialists San Diego Med Fndtn*
NPI: 1669617197
386 E H ST STE 202
Chula Vista, CA 91910
(858) 966-8133
(858) 966-8133
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No

Your PCP's provider group may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require a mental health service provider to obtain Blue Shield's prior authorization before the service can be covered.

To online access mental health service provider list, please visit blueshieldca.com/fad.
D9. Blue Shield Promise

紧急護理設施

CHULA VISTA, CA 91910
☎ (858) 966-8133
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Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No

**Rady Childrens Specialists San Diego Med Fndtn**

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Accepting New Patients: No
D9. Blue Shield Promise 緊急護理設施

**FNDTN***
* NPI: 1669617197
  386 E H ST STE 202
  CHULA VISTA, CA 91910
  (858) 966-8133
  (858) 966-8133
  Accessibility: CONTACT PROVIDER
  N/A
  Accepting New Patients: No

**Rady Childrens Specialists San Diego Med FNDTN***
* NPI: 1669617197
  2125 CITRACADO PKWY STE 100
  ESCONDIDO, CA 92029
  (760) 755-7600
  (760) 755-7600
  M-F 8:00AM-5:00PM
  Accessibility: CONTACT PROVIDER
  N/A
  Accepting New Patients: No

ESCONDIDO

**Rady Childrens Specialists San Diego Med FNDTN***
* NPI: 1669617197
  2125 CITRACADO PKWY STE 100
  ESCONDIDO, CA 92029
  (760) 755-7600
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  Accessibility: CONTACT PROVIDER
  N/A
  Accepting New Patients: No
D9. Blue Shield Promise 緊急護理設施

Accepting New Patients: No

RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN*
NPI: 1669617197
2125 CITRACADO PKWY STE 100
ESCONDIDO, CA 92029
(760) 755-7600
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N/A
Accepting New Patients: No
D9. Blue Shield Promise 緊急護理設施

<table>
<thead>
<tr>
<th>(760) 755-7600</th>
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<td>M-F 8:00AM-5:00PM</td>
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</tbody>
</table>

Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No

RASY CHILDREN
SPECIALISTS SAN DIEGO MED FNDTN*
NPI: 1669617197

2125 CITRACADO PKWY
STE 100
ESCONDIDO, CA 92029
(760) 755-7600
(760) 755-7600
M-F 8:00AM-5:00PM
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Accepting New Patients: No

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RACY CHILDRENS
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RACY CHILDRENS
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FNDTN*
NPI: 1669617197
5565 GROSSMONT CENTER DR STE 2
LA MESA, CA 91942
(858) 576-1700
(858) 576-1700
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No

RACY CHILDRENS
SPECIALISTS SAN DIEGO MED
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2436

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PROVIDER
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Accepting New Patients: No

RADY CHILDRENS
SPECIALISTS SAN DIEGO MED
FNDFTN*
NPI: 1669617197
5565 GROSSMONT
CENTER DR STE 2
LA MESA, CA 91942
(858) 576-1700
(858) 576-1700
Accessibility: CONTACT
PROVIDER
N/A
Accepting New Patients: No

Your PCP's provider network may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, some services may require prior authorization from the mental health service provider before being covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
Your PCP’s doctor group may have its own network of mental health service providers. Please refer to the list below. You can directly contact these providers. Please note, certain services may require mental health service providers to obtain Blue Shield prior authorization, and then the service will be covered.

To access the mental health service provider list online, please visit blueshieldca.com/fad.
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| Accepting New Patients: No |

| RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN* |
| NPI: 1669617197 |
| 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942 |
| (619) 713-5375 |
| (619) 713-5375 |
| Accessibility: CONTACT PROVIDER |
| N/A |
| Accepting New Patients: No |

| RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN* |
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| 5565 GROSSMONT CENTER DR STE 2 LA MESA, CA 91942 |
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### D9. Blue Shield Promise

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D9. Blue Shield Promise 緊急護理設施

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Please refer to the following for your PCP's network of behavioral health providers. You may contact them directly. Please note that some services may require preauthorization from the behavioral health provider before they can be covered.

To view the complete behavioral health provider list online, visit [blueshieldca.com/fad](https://www.blueshieldca.com/fad).
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2441
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D9. Blue Shield Promise

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SAN DIEGO

RACY CHILDRENS

SPECIALISTS SAN DIEGO MED
FNDTN*

NPI: 1669617197

3605 VISTA WAY STE 172
OCEANSIDE, CA 92056

(760) 547-1020

(760) 547-1020

Accessibility: CONTACT

N/A

Accepting New Patients: No
### D9. Blue Shield Promise 緊急護理設施

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D9. Blue Shield Promise

緊急護理設施

Rady Childrens Specialists San Diego Med Fndtn*

NPI: 1669617197

4305 University Ave Ste 150
San Diego, CA 92105
(619) 280-2905
(619) 280-2905
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No

Rady Childrens Specialists San Diego Med Fndtn*

NPI: 1669617197

3020 Childrens Way
San Diego, CA 92123
(858) 966-8800
(858) 966-8800
Accessibility: CONTACT PROVIDER
N/A
Accepting New Patients: No

Rady Childrens Specialists San Diego Med Fndtn*

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3020 Childrens Way
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D9. Blue Shield Promise

紧急護理設施

PROVIDER

N/A
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RADY CHILDRENS
SPECIALISTS SAN DIEGO MED FNDTN*
NPI: 1669617197
3020 CHILDREN'S WAY
SAN DIEGO, CA 92123
☎ (858) 966-8800
☎ (858) 966-8800
Accessible: CONTACT PROVIDER
N/A
Accepting New Patients: No

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N/A
Accepting New Patients: No

Your PCP's doctor group may have its own network mental health service providers. Please see the following list. You can contact these providers directly. Please note, certain services may require the mental health service provider to obtain Blue Shield's prior authorization before they can be covered.

To view the mental health service provider list online, please visit blueshieldca.com/fad.
D9. Blue Shield Promise 緊急護理設施

FNNDTN*  
NPI: 1669617197  
3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
(858) 966-8800  
(858) 966-8800  
Accessibility: CONTACT PROVIDER  
N/A  
Accepting New Patients: No

RODY CHILDREN  
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NPI: 1669617197  
3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
(858) 966-8800  
(858) 966-8800  
Accessibility: CONTACT PROVIDER  
N/A  
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SAN DIEGO, CA 92123  
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(858) 966-8800  
(858) 966-8800  
Accessibility: CONTACT PROVIDER  
N/A  
Accepting New Patients: No
D9. Blue Shield Promise 緊急護理設施

**Rady Childrens Specialists San Diego Med Fndtn**

- **NPI:** 1669617197
- **Address:** 3020 Childrens Way, San Diego, CA 92123
- **Phone:** (858) 966-8800, (858) 966-8800
- **Accessibility:** CONTACT PROVIDER
- **N/A**
- **Accepting New Patients:** No

**San Diego**

**Rch Mid City Urgent Care**

- **NPI:** 1710065933
- **Address:** 4305 University Ave Ste 150, San Diego, CA 92105
- **Phone:** (619) 280-2905, (619) 280-2905
- **Accessibility:** CONTACT PROVIDER
- **N/A**
- **Accepting New Patients:** No

**San Diego**

**Southbay Urgent Care Inc**

- **NPI:** 1558746750
- **Address:** 1628 Palm Ave, San Diego, CA 92154
- **Phone:** (619) 591-9999, (619) 591-9999
- **Site Languages(s) Spoken:** Spanish, Vietnamese
- **Accessibility:** CONTACT PROVIDER
- **https://www.southbayurgentcare.com/**
- **Accepting New Patients:** No

**Los Angeles**

**Rch East County Urgent Care**

- **NPI:** 1710065933
- **Address:** 5565 Grossmont Center Dr Ste 2, La Mesa, CA 91942
- **Phone:** (619) 713-5375, (619) 713-5375
- **Accessibility:** CONTACT PROVIDER
- **N/A**
- **Accepting New Patients:** No

**Oceanside**

**Rch Oceanside Urgent Care**

- **NPI:** 1710065933
- **Address:** 3605 Vista Way Ste 172, Oceanside, CA 92056
- **Phone:** (760) 547-1000, (760) 547-1000
- **Accessibility:** CONTACT PROVIDER
- **N/A**
- **Accepting New Patients:** No
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<tr>
<td>ANGRA, KUNAL</td>
<td>97, 112, 166, 559, 612, 613, 709</td>
</tr>
<tr>
<td>ANGUIANO, FRANCISCO</td>
<td>125</td>
</tr>
<tr>
<td>ANOSHIVANI, ARDE</td>
<td>472</td>
</tr>
<tr>
<td>ANSARI, HOSSEIN</td>
<td>296</td>
</tr>
<tr>
<td>ANSARI, RASHAD</td>
<td>764</td>
</tr>
<tr>
<td>ANSARI, SHORA</td>
<td>462</td>
</tr>
<tr>
<td>ANTHONY, JULIAN</td>
<td>198, 579</td>
</tr>
<tr>
<td>ANTHONY, SHARON</td>
<td>600</td>
</tr>
<tr>
<td>ANTONYAN, HOLLY</td>
<td>540</td>
</tr>
<tr>
<td>ANUFORO, CHINWE</td>
<td>207</td>
</tr>
<tr>
<td>ANWAR, YASMIN</td>
<td>1867, 2212</td>
</tr>
<tr>
<td>ANYADIKE, CYRIL</td>
<td>500</td>
</tr>
<tr>
<td>ANZA HOUSE</td>
<td>2252</td>
</tr>
<tr>
<td>AOTO, KIM</td>
<td>95, 160, 189, 336, 536, 644, 1602, 1649, 1662, 1681, 1771, 1840, 1876, 2051, 2330, 2359, 2344, 2369, 2385, 2396, 2397</td>
</tr>
<tr>
<td>ARAIZA, ERNESTINA</td>
<td>162, 1650, 2261</td>
</tr>
<tr>
<td>ARANETA, TOMAS</td>
<td>49</td>
</tr>
<tr>
<td>ARBOR HILLS NURSING CENTER</td>
<td>779, 2244</td>
</tr>
<tr>
<td>ARCA, CHR</td>
<td>572</td>
</tr>
<tr>
<td>ARCE GOMEZ, LAURA</td>
<td>18, 1023</td>
</tr>
<tr>
<td>ARCHAMBAULT, CHRISTIAN</td>
<td>1422</td>
</tr>
<tr>
<td>ARCHIBALD, JOHN.200</td>
<td>223, 437, 511, 735, 2358, 2397</td>
</tr>
<tr>
<td>ARCOVEDO, RODOLFO</td>
<td>141</td>
</tr>
<tr>
<td>ARD, SCOTT</td>
<td>353</td>
</tr>
<tr>
<td>ARDIGO, GREGORY</td>
<td>500, 727</td>
</tr>
<tr>
<td>ARELLANO, JACQUELINE</td>
<td>163, 281, 599, 1651, 1712, 1925</td>
</tr>
<tr>
<td>ARGOUDE, GEORGES</td>
<td>114, 719, 720</td>
</tr>
<tr>
<td>ARGUELLO, JUAN</td>
<td>411</td>
</tr>
<tr>
<td>ARIAS-ALISHAHI, ELIZABTH</td>
<td>217</td>
</tr>
<tr>
<td>ARIELLA, LYnda</td>
<td>2202, 2319</td>
</tr>
<tr>
<td>ARIF, MUHAMMAD</td>
<td>32, 48</td>
</tr>
<tr>
<td>ARJOMANDI, NEDA</td>
<td>389</td>
</tr>
<tr>
<td>ARLATA, TAMANTHA</td>
<td>1579</td>
</tr>
</tbody>
</table>
E. 服務提供者索引

ARLINGHAUS, RENE......................... 2265
ARMANI, AVA.177, 321, 685, 764, 1668, 1820, 2168, 2231
ARMANIOUS, NANCY..............................31
ARMEEN, GARY. .............308, 1793, 2120
ARMANIOUS, NANCY..............................31
ARNETT, JUSTIN..........................298, 639
ARONLEE, TRACY.................. 2293, 2294
ARROYO, VANIA. ....................................653
ASHKENAZE, DAVID.............................349
ASHIZAWA, JAMES...................................79
ASHMAN, ELLEN.............................. 207
ASHMAN, RANDY. ........................ 165
ASHRAF, HADIA. ............................... 81
ASHRAF, HEBA. .............................. 202, 243
ASHTARI, MOZHGAN.................. 42
ASHTIANI, ALI. ............................... 236
ASIMAKOPOULOS, FOTIOS.............1742
ASIS, STEPHANIE.... 2339, 2350, 2370
ASLAN, AZITA.... 534, 636, 1215, 1875
ASPREC, JOSEPH. ................................. 47
ASSADIAN, MEHRAK........... 612, 1291
ASSELIN, LYNETTE.................. 1598
ASTOURIAN, PATRICK... 577
ATCHISON, MARVIN...... 229, 772, 773
ATHILL, CHARLES.................. 107, 595
ATIENZA, PAMELA. ........... 1056
ATIGA, SCHUBERT........... 125, 1623, 1624
ATILLO, RONALD MAR... 281, 600
ATKINS, AARON.................. 439, 517, 518
ATKINS, CHEYENNE. ............................... 517
ATKINS, WILLIAM ........... 518, 740
ATMAR, AKMAL.................. 537, 1877
ATTIA, NADER.205, 216, 420, 494, 504, 505, 722, 723
ATTOBRA, TATIANA. .................. 771
AUBERACH, STEPHEN............... 555
AUNIT PAGE, LUKAS. ................. 2078
AUSTIN, ANDREA........... 1729, 1968
AUSTIN, MARK. ........... 439
AVALLONE, THOMAS... 188, 639, 2370
AVALOS, ROY.................. 162, 280
AVIARA HEALTHCARE CENTER.778,
2242
AVILA, MICHAEL. ............... 28, 1141
AVOCADO POST ACUTE. ....... 778, 2239
AWADALLA, FARAH........ 348, 540
AWDISHO, ALAN.... 26, 157, 1095, 1648
AWDYKOVYCH, MARTA. .......... 1422
AYELE, MAHOGANY............... 752, 2213
AYON MARTINEZ, CARLOS... 84, 1592
AYSON, NICOLE. ............... 1422, 1423
AZAD, HABIB................. 452, 454
AZAM, ARSALAN. ... 113
AZIMI, AYSUN.................. 1423
AZIMI, NASSIR................. 327
AZIMI, SHERRI. .............. 760
AZIZ AWAD AWADALLA,
MARINAEMAD ............. 735
B
BABBIA, ARDACLAN........... 243
BABKINA, NATALIYA. ........... 187
BACHARACH, REBECCA... 1303, 1580
BACMAN, JOHN............. 162
BACON, LOUISE. .......... 395, 478
BADALYAN, SEDA............... 39, 291
BADER, RACHEL................. 666
BADIE, MEHRNAZ. .............. 52
BAN, JINHYI. ................. 1880
BAEK, WANGJUN. ........... 449
BAEK, KILHYO. .......... 557, 752, 1220, 1221
BAEK, BEATRICE. .................. 1200
BAEZ, ELIZABETH. .............. 752
BAGBY, JESSICA. .......... 1729, 1968
BAGHERI, BITA. ........ 241
BAGHOUMIAN, MARINEH. .... 2370
BAGINGOTO, AUSTIN........ 1303
BAGINSKI, LEON.................................. 457
BAGRODIA, ADITYA .......... 325
BAHADOR, AFSHIN. .......... 622
BAHADORANI, JOHN........ 353
BAHENA-COLLEY, SANDRA 539, 666
BAHIA FAMILY MEDICAL GROUP INC. .......... 13
BAHRAMZI, MARIA........ 1303, 1304
BAI-TONG, SHIYU. ....... 1657, 1755, 2013
BAIG, NABIL.................. 115, 147
BAIK, JESSICA. ................. 84
BAILEY, CHARLES. .......... 91
BAILEY, CRISTINA. ........ 65
BAILEY, JACOB............ 315, 667, 1808, 2140
BAILEY, THOMAS. ........ 457, 586
BAILEY, TIMOTHY. ........ 183
BAILIS, JESSICA. .......... 314, 1803, 2273
BAILONY, AHMAD........... 1215
BAILONY, MOHAMMED.... 1215
BAIN, NATALIE. .......... 1304
BAISLEY, SHAWN. ....... 1006, 1160
BAJWA, MANDEEP. .......... 1423
BAJWA, SAIF. ................. 47
BAKER, BRUCE. .............. 493
BAKER, DAVID. .............. 98, 172
BAKER, LINDZEE. ............ 308
BAKER, ROBERT. ............ 224, 736, 737
BAKER, SERENA.............. 207
BAKER, TANYA. ............... 1928
BAKHTIARY, PEJMAN........ 732
BALAKER, ASHLEY........... 258, 383, 384
BALBOA NURSING AND REHAB CTR. ........ 2248
BALDERAS-MAGALLANES,
RUDOLF. .................. 22, 117
BALDONADO, ANALICIA... 1065, 1066
BALDWIN, ANDREA. .... 557, 1880
BALDWIN, DONNA. ........ 190, 1248
BALIKIAN, PHILIP........ 579, 1915
BALL, SHELDON. .......... 625, 1996
BALL-ZONDERVAN, MONICA. .... 50
BALLARD, BROOKE. .... 1847, 2178

2455
E. 服务提供者索引

BERGERON, PATRICK .......... 1814, 2158
BERGREN, ERICA .. 631, 716, 717, 1556
BERGMARK, JAMIE ...... 2350, 2398
BERKOFF, GREGORY .......... 287
BERMAN, BRETT .......... 107, 118, 280
BERMAN, ZACHARY ....... 1808, 2144
BERNADETT, ALEX ...... 618, 1979, 1980
BERNALES-MENDEZ, DEZARINA .... 331
BERNARDETT, ALEX .... 618, 1979, 1980
BERNE, YEMISRACH .... 24
BERNETICH, MEGHAN ... 2213, 2214
BERNSTEIN, DAVID .... 519
BERRY, JULIE .......... 567, 762
BERRY, MICHAEL .......... 96
BERTelsen, CAITLIN ........ 552
BERUMEN, JENNIFER ...... 2169
BESHAI, ALFRED ........ 235, 444
BESSUDO, ALBERTO .. 169, 502, 623, 709
BEXFORDT, LYDIA ........ 1254
BETS, ANDRES .......... 493, 582
BETTY, MARYANN .. 1628, 1685, 1840, 1901, 2079
BEVINS, ELIZABETH ... 660, 1759, 2024
BEYENE, YEMISRAH ...... 24
BHAIU, JESHMIN .......... 666
BHATIA, PRERANA .... 171
BHATIA, SHAGUN .. 1661, 1680, 1855, 1895, 2044, 2345, 2350, 2398
BHATT, JIKA .......... 596
BHATTACHARJEE, RAKESH .... 2105
BHOURUL, SUNIL ........ 148, 321
BIALOSTOZKY, MARIO .... 2079
BIAMA, RICHARD .......... 747
BIANCHI, CHRISTIAN .... 519
BICKLER, STEPHEN ........ 2183
BIERMAN, DINA .......... 540
BIFRI, SUSAN .... 1866, 2118
BIGGERS, ALAINA .......... 629
BILAL, BASSAM ........ 46
BILAN, NATALIA .......... 63
BILLECI, BARTON .... 38, 248
BILLINGTON, KATHERINE .... 1959
BILLOTTA, NATALIE ...... 600, 1929
BINAVI, HOWNAZ ..... 96, 163, 347, 600
BINDAL, ANKUR .... 123, 135, 634, 660
BINETTE, DONY .......... 1476, 1477, 1881
BINDER, NICHOLAS ... 94, 159, 188, 299, 332, 639, 640, 2330, 2339, 2351, 2371, 2386, 2398
BINDER, PRATIBHA ... 172, 297, 506, 565, 759, 1659, 1760, 1855, 1895, 2225
BIRD, JEREMY ........ 282
BIRO, NICOLAS .......... 733
BISCHER, MARGARET .... 282
BISHOP, LESLIE ........ 96, 181, 573
BISUNA, BLANCA .......... 50, 447
BISWAS, MIMI .... 199, 205, 216, 494, 723
BIXBY, MINDY ........ 91, 92
BLACK, JASON .......... 55
BLACK, NICHOLAS .... 287, 1730
BLAIR, MICAH ...... 323, 689, 1824, 1825, 2178
BLAKE, GARY ...... 636, 1378, 1379, 2032
BLAKESPEAR, JEREMY .... 1508
BLAND, HOWARD ........ 358
BLAND, JACELIS .... 1909, 2193
BLASKIEWICZ, DONALD .... 1605, 1823
BLISS, MORGAN .. 1662, 1682, 1856, 1900, 2054
BLOCK, EDWARD .... 449
BLOCKER, NIRIT .... 1468, 1469
BLOOMBERG, DAVID .... 760
BLOSSER, JOSHUA .... 84
BLOSSER, NICHELE .... 87
BLUCHER, CHERI .... 516
BLUMENFELD, LIZA .... 320, 683
BO, JERRY ...... 534, 538, 539, 634, 660
BOCK, MATTHEW .... 2071
BODDU, NAVNEET .... 556
BODFORD, SAMANTHA .. 1305, 1306
BODGIN, DAVID .... 328
BODIN, NICHOLAS .... 297, 1761
BONILLA, EDWARD .... 220
BONNICI, MARCELLA ..... 90
BONNSU, KEMA .. 537, 1216, 1423, 1424
BOODMAN, SANDRA .... 250
BOOJINDASUP, AARON .... 572
BOOTH, CHRISTOPHER .... 1803, 2274
BOQUIN, ENRIQUE ..... 89
BORDIN-WOSK, TALYA .... 1746, 1996
BORECKY, ADAM .... 346, 347
BORK, ZEA .......... 293, 627
BORQUEZ, ALEJANDRO .... 1858, 2071
BORRAJERO, OBE .. 1702
BORRERO, MARCOS ...... 74, 1354, 1989
BORSAN, COSMIN .... 1524
BORTNER, ADAM .... 1306
BORTNIKER, ETHAN ..... 167, 289
BORTZ, DAVID .... 147, 292
BORTZ, PASCAL .... 148, 321
BOSTON, LAURA ...... 1018, 1019, 1290
BOSWELL, GILBERT .... 317, 671
BOUCHARD, REID .... 570, 764
BOULDER CREEK POST ACUTE .. 780, 2247
BOURLAND, BRYAN .... 689
BOUTELLE, AMY .... 1714
BOUTELLE, BARBARA .. 105, 156, 579, 681, 713, 718, 764
BOUTELLE, DAVID .. 105, 196, 579, 681, 713, 718, 764, 1604, 2211
BOUTELLE, KERI .... 314, 1804, 2274
BOW, LINDA .......... 261, 413
BOWERS, JESSIE .... 1424
BOYD, JAMES ...... 65, 289
BOYD, LISA .... 1793, 2121
BOYDSTON, EMILY .... 720
BOYS, JOSHUA .... 1828
BRAAMS, CHLOE .... 752
BRACE, ELION .......... 22
BRADLEY COURT SPECIAL CARE CENTER .... 778
## E. Service Provider Index

<table>
<thead>
<tr>
<th>Name</th>
<th>Page Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>BRADSHAW, MICHAEL</td>
<td>613</td>
</tr>
<tr>
<td>BRADY, KATELYN</td>
<td>1714</td>
</tr>
<tr>
<td>BRADY, MATTHEW</td>
<td>394, 395, 476, 478</td>
</tr>
<tr>
<td>BRADY, PATRICIA</td>
<td>1306</td>
</tr>
<tr>
<td>BRAH, STEPHEN</td>
<td>226</td>
</tr>
<tr>
<td>BRAHMBHATT, BHOMI</td>
<td>636</td>
</tr>
<tr>
<td>BRAMBILA, YELENA</td>
<td>653</td>
</tr>
<tr>
<td>BRANCH, CODY</td>
<td>317, 671, 1809, 2144</td>
</tr>
<tr>
<td>BRANNEN, MANDY</td>
<td>153, 1644</td>
</tr>
<tr>
<td>BRAR, HARINDER</td>
<td>501, 505, 506</td>
</tr>
<tr>
<td>BRAR, SIMERJEET</td>
<td>311, 2275, 2295</td>
</tr>
<tr>
<td>Broot, SHARON</td>
<td>317, 672</td>
</tr>
<tr>
<td>BRAR, SUKHDEEP</td>
<td>207</td>
</tr>
<tr>
<td>BRAINT, ADAM</td>
<td>207</td>
</tr>
<tr>
<td>BRAUN, TARA</td>
<td>166, 613</td>
</tr>
<tr>
<td>BRAVEMAN, IRA</td>
<td>58, 1212</td>
</tr>
<tr>
<td>BRAVO, ARLENE</td>
<td>441, 742</td>
</tr>
<tr>
<td>BRAVO, RICARDO</td>
<td>653</td>
</tr>
<tr>
<td>BRAYTENBAH, MELANIE</td>
<td>111, 1607</td>
</tr>
<tr>
<td>Brael, DANIELLE</td>
<td>292, 625</td>
</tr>
<tr>
<td>BRECKON, SAMANTHA</td>
<td>680</td>
</tr>
<tr>
<td>BREDENKAMP, JAMES</td>
<td>463</td>
</tr>
<tr>
<td>BREEDLOVE, AMANDA</td>
<td>2295</td>
</tr>
<tr>
<td>BREITHAUP, ANDREW</td>
<td>540</td>
</tr>
<tr>
<td>BREMNER, AMY</td>
<td>403</td>
</tr>
<tr>
<td>BREMER, LUKE</td>
<td>177</td>
</tr>
<tr>
<td>BRENDECKE, LORIE</td>
<td>516</td>
</tr>
<tr>
<td>BRERETON, DANIELLE</td>
<td>143, 689</td>
</tr>
<tr>
<td>BREWER, ANH</td>
<td>54</td>
</tr>
<tr>
<td>BREWER, SARAH</td>
<td>45</td>
</tr>
<tr>
<td>BRIED, JAMES</td>
<td>579, 1916</td>
</tr>
<tr>
<td>BRIGGS, BENJAMIN</td>
<td>2101</td>
</tr>
<tr>
<td>BRIGGS, BRIDGET</td>
<td>54, 84</td>
</tr>
<tr>
<td>BRIGHTON PLACE EAST</td>
<td>781</td>
</tr>
<tr>
<td>BRIGHTON PLACE SAN DIEGO</td>
<td>780, 2248</td>
</tr>
<tr>
<td>BRIGHTON PLACE SPRING VALLEY</td>
<td>781, 2251</td>
</tr>
<tr>
<td>BRISIN, CIRSTEN</td>
<td>217</td>
</tr>
<tr>
<td>BRION, PAUL</td>
<td>571, 764</td>
</tr>
<tr>
<td>BRION, SONJA</td>
<td>1134</td>
</tr>
<tr>
<td>BRIONES COLMAN, FELICIA</td>
<td>1358</td>
</tr>
<tr>
<td>BRODAK, DANIKA</td>
<td>113</td>
</tr>
<tr>
<td>BRODERICK, RYAN</td>
<td>686, 2170</td>
</tr>
<tr>
<td>BRODSKY, DENNIS</td>
<td>568</td>
</tr>
<tr>
<td>BRODSKY, MARK</td>
<td>1307</td>
</tr>
<tr>
<td>BROGAN, JACQUELINE</td>
<td>154, 155, 529, 574</td>
</tr>
<tr>
<td>BROOME, HELEN</td>
<td>1789, 2067</td>
</tr>
<tr>
<td>BROODY, ABRAHAM</td>
<td>1057</td>
</tr>
<tr>
<td>BROUHA, BROOK</td>
<td>166, 613</td>
</tr>
<tr>
<td>BROUHA, SHARON</td>
<td>317, 672</td>
</tr>
<tr>
<td>BROWN, COLLEEN</td>
<td>653</td>
</tr>
<tr>
<td>BROWN, DARCIE</td>
<td>2295</td>
</tr>
<tr>
<td>BROWN, EDEN</td>
<td>629</td>
</tr>
<tr>
<td>BROWN, HOSEA</td>
<td>43, 204, 270</td>
</tr>
<tr>
<td>BROWN, JOHNNY</td>
<td>716</td>
</tr>
<tr>
<td>BROWN, KEVIN</td>
<td>211</td>
</tr>
<tr>
<td>BROWN, RICHARD</td>
<td>151, 322</td>
</tr>
<tr>
<td>BROWN, SHENISE</td>
<td>182</td>
</tr>
<tr>
<td>BROWNING, ELIZABETH</td>
<td>1703</td>
</tr>
<tr>
<td>BROWNLOW, ROY</td>
<td>106, 327, 594</td>
</tr>
<tr>
<td>BRUBAKER, ALEAH</td>
<td>2170, 2171</td>
</tr>
<tr>
<td>BRUECKNER, Tammie</td>
<td>1793, 2121</td>
</tr>
<tr>
<td>BRUGGEMAN, ANDREW</td>
<td>138, 316, 341, 668</td>
</tr>
<tr>
<td>BUCKNER, JOSEPH</td>
<td>716, 1572, 1573</td>
</tr>
<tr>
<td>BUECHNER, CHARLENE</td>
<td>1044, 1104, 1105, 1184, 1379, 1380, 1381, 1382, 1583</td>
</tr>
<tr>
<td>BUI, KEVIN</td>
<td>317, 672</td>
</tr>
<tr>
<td>BUI, MAI</td>
<td>1964, 1965</td>
</tr>
<tr>
<td>BUKATA, SUSAN</td>
<td>323, 689, 1825, 2179</td>
</tr>
<tr>
<td>BULKEN, ANATOLY</td>
<td>197</td>
</tr>
<tr>
<td>BULLOCK, EDGAR</td>
<td>158, 187, 1105, 1172</td>
</tr>
<tr>
<td>BULOCK, ANDREW</td>
<td>130, 576, 577, 652</td>
</tr>
<tr>
<td>BULLUM, ANTHONY</td>
<td>200, 1701</td>
</tr>
<tr>
<td>BULOW, KWI</td>
<td>2207</td>
</tr>
<tr>
<td>BUNDY, KATHLEEN</td>
<td>680</td>
</tr>
<tr>
<td>BUNKE, NISHA</td>
<td>322, 765</td>
</tr>
<tr>
<td>BUNOSKY, ABIGAIL</td>
<td>1814, 2158</td>
</tr>
<tr>
<td>BURCIGIA, HENRY</td>
<td>715</td>
</tr>
<tr>
<td>BURDI, MICHAEL</td>
<td>481</td>
</tr>
<tr>
<td>BURGAMY, ELIZABETH</td>
<td>1010</td>
</tr>
<tr>
<td>BURGESS, DANIEL</td>
<td>177, 321</td>
</tr>
<tr>
<td>BURKE, ALICIA</td>
<td>111</td>
</tr>
<tr>
<td>BURLAKOVSKY, NATHAN</td>
<td>139</td>
</tr>
<tr>
<td>BURNEY, BRAEANNE</td>
<td>282, 600</td>
</tr>
<tr>
<td>BURNIKEL, DAVID</td>
<td>689</td>
</tr>
<tr>
<td>BURNS, DELLA</td>
<td>1254</td>
</tr>
<tr>
<td>BURNS, RICHARD</td>
<td>733</td>
</tr>
<tr>
<td>BURNS, ROBERT</td>
<td>554</td>
</tr>
<tr>
<td>BURRIS, RYAN</td>
<td>235, 242</td>
</tr>
<tr>
<td>BURROUGHS, GLORIA</td>
<td>228, 721</td>
</tr>
<tr>
<td>BURROWS, TERENCE</td>
<td>1725, 1959</td>
</tr>
<tr>
<td>BURROWS, WILLIAM</td>
<td>1298</td>
</tr>
<tr>
<td>BURRELL, KAYLA</td>
<td>740</td>
</tr>
<tr>
<td>BURTON, LUCAS</td>
<td>1307</td>
</tr>
<tr>
<td>BURTON, PAUL</td>
<td>231</td>
</tr>
<tr>
<td>BUSCH, HEIDI</td>
<td>97</td>
</tr>
<tr>
<td>BUSH, JAMES</td>
<td>646</td>
</tr>
<tr>
<td>BUSH, KELLY</td>
<td>2101</td>
</tr>
<tr>
<td>BUSH, MELISSA</td>
<td>251, 255, 367, 368, 369</td>
</tr>
<tr>
<td>BUSINO, ROWLEY</td>
<td>337</td>
</tr>
<tr>
<td>BUSTAMANTE, ANGEL</td>
<td>438</td>
</tr>
<tr>
<td>BUSTOS, JERROLD</td>
<td>423</td>
</tr>
<tr>
<td>BUTLER, KIM</td>
<td>2339</td>
</tr>
<tr>
<td>BUTLER, LISA</td>
<td>75</td>
</tr>
<tr>
<td>BUTLER, PHILIP</td>
<td>148, 343, 695</td>
</tr>
<tr>
<td>BYNON, KRISTEN</td>
<td>388</td>
</tr>
<tr>
<td>CABADING, DOREEN</td>
<td>1072</td>
</tr>
<tr>
<td>CABALLERO, JAMES</td>
<td>612, 1291, 1292</td>
</tr>
<tr>
<td>CABARLO, JEHRIB</td>
<td>1424, 1566</td>
</tr>
</tbody>
</table>
E. 服務提供者索引

CALABRIA, MEGAN.....................286, 610
CALABRIA, MEGAN.......................... 308
CALZADA, AUDREY. .101, 129, 646, 647
CALDAGER, JUANMOLINA, JUAN..533, 632
CALDERON MORALES, ASTRID.141, 196, 683, 1640, 1696, 2163, 2164
CALDERON, JORGE. ....................1545
CALEHOUN, CHANELLE. ........1236, 1237
CALIFANO, JOSEPH.303, 646, 1774, 196, 683, 1640, 1696, 2163, 2164
CALLAGHAN, KATHRYN. ................ 2295
CALLAWAY, MALLORY.................. 680
CALLISON, YANHUI.......................... 599
CAMES, ANGELICA.......................... 194
CALZADA, AUDREY..101, 129, 646, 647
CAMAQHIN, MIA..........................282, 600
CAMARGO, SANDRA......................... 120
CAMARGO-LOWTHERS, ANGELICA. ...601, 1930
CAMARILLO, DANIEL ..................48, 85
CAMERON, KENDALL. .............577
CAMERON, MELISSA...................... 1689, 2110
CAMP, ANDREW. .......................... 2044
CAMP, PATRICKA. ....................... 1651
CAMPBELL, AMBER.................... 496
CAMPBELL, KERRI.55, 618, 1200, 1307, 1308, 1980
CAMPBELL, SARAH...................... 2079
CAMPBELL, TANNER...................... 2179
CAMPOS, MELISSA.......................... 1024, 1524
CANDARE, VANESSA.................... 308
CANLASS, AVELINO. .................1200, 1201
CANO, STANLEY.......................... 1918
CANTRELL, SARAH...................... 286, 610
CANTU, ALCIA.........................2110
CANTU-REYN, GUILLERMO.58, 1214, 1375
CAO, LISA..................................467
CAO, STEPHANIE.......................... 2399
CAO-NGUEN, TIEN......................173
CARABILEA, GABRIEL...............317, 672, 1809
CARBS, CLARITA............................ 75, 627
CARAPIA, FABIOLA......................1607
CARASQUERO, ANDREA........356, 390
CARAZO, MATTHEW.....................280, 596
CARBONELL, SONIA...................... 666
CARDENAS, MICHAEL................. 297, 636
CARDENAS, MIRIAM....................153, 528, 601
CARDENAS, RICARDO.................. 388
CARDINELL, ANNA. 163, 752, 1652, 2214
CARDINES, ARTHUR..................1581
CARDOZA, CLAUDIA...................... 2272
CARE HERIDIAN LA MESA.............. 2244
CARLIN, CHRISTOPHER............... 583
CARLSON, JOHNN.............220, 508
CARLSON, KATHLEEN....................1881
CARLSON, ROBERT...................... 55
CARLSON, STEVEN.107, 151, 180, 596, 707
CARMEL PENN, CORNELIA.194, 713, 1693, 2266
CARMEL MOUNTAIN REHAB AND
HEALTHCARE CTR. .................. 780, 2248
CARMA, RUBEN. 138, 341, 669, 1634, 1844, 2142
CARNEY, AMY.............................181, 1137, 1138
CARPENTER, ROBERT.1095, 1546, 1547
CARR, CHERYL.........................239, 446
CARR, MIANDA..........................716, 1556, 1557
CARR, OLIVIA............................ 261, 388, 469
CARR, WARNER....................233, 442, 443
CARR, BARBARA....................2193
CARRABY, ARNETT.................126, 332, 534
CARRERA, JORGE ...................... 30, 1152, 1153
CARRIEDO CENICEROS, MARIA.81, 1201, 1308, 1525
CARRILLO, MARITZA.114, 1021, 1299, 1611
CARRION GELABERT, ANA......111, 1608
CARROLL, JEANNE.....................2013
CARROLL, SARAH...................... 567
CARMEN, COREY....................1308, 1309
CARMEN, LATISA.....................1557
CARMEN, MIA.......................... 32
CARMEN, STEPHEN.....................1425
CARWELL, AIMEE. 317, 672, 1809, 2145
CARTER, CAILTIN........................2104
CARTER, KHALIL.1045, 1105, 1106, 1184, 1382, 1383, 1384, 1583, 1584
CARTER, NATASHA........................ 1298
CARTER, STEPHANIE.................... 162, 163
CARTWRIGHT, SHANIQUE................. 729
CARMALHO, DANIEL.................... 1857, 2055
CASA PACIFICA ADHCC................... 2258
CASE, ERINN......................... 601
CASEY, SHANNON....................1650, 2262
CASA, BERUMEN, SERGIO.141, 197, 686, 1640, 1697, 2171
CASSADAY, DONALD.................... 32
CASTANER, ZALYA. 750, 1141, 1142, 1592
CASTELLANO, TIFFANY.617, 1730, 1970
CASTELLANOS, GRACIELA............. 120
CASTELLANOS, JOEL. .................1711, 1922
CASTELLANOS, LUIS...................1923
CASTELLON, SHAWN.................... 422, 771
CASTELNOVI, CLAUDIA.................1425
CASTELLEJOS, DAVID.................. 2334
CASTELLEJOS, MARIA................... 2334
CASTILLO, MARIA........................ 636
CASTILLO, PATRICIA.1448, 1449, 2121
CASTILLO, STEPHANIE.................1525
CASTILLO, TAYLOR...................... 192, 2266
CASTLE NURSING AND REHABILITATION CTR. 780, 2246
CASTREJON, JOSEPH.................... 87
CHAMBERS, KATRINA..............164, 1652
CHAN, ANDY...........................................1358
CHAMBI-HERNANDEZ, RUTH. 32, 213
CHAN, JESSICA............................. 358, 448
CHAN, JASON. ......................................... 232
CHAN, ALONSO........................................131
CHAKRABARTY, MILANKUMAR. ....213
1185, 1387, 1388, 1389, 1584, 1585
CHAKRABARTI, PRIYA.1046, 1106, 1107,
CHAMBERLIN, KALIANA...........557, 752
CHAMBERS, KATRINA.............164, 1652
CHAMBI-HERNANDEZ, RUTH. 32, 213
CHAN, ALONSO......................... 131
CHAN, ANDY.............................. 1358
CHAN, JASON............................. 232
CHAN, JESSICA......................... 358, 448
CHAN, JUDY.............................. 446
CHAN, JUSTIN............................ 177, 178
CHAN, KWOK FUNG..................2334, 2340
CHAN, LINDA............................ 393
CHAN, TIFFANY.......................... 1449
CHAND, RAVINDRA.................... 192
CHANDRADAS, SAJIV................... 619
CHANG KIMES, AUDREY............... 356
CHANG, ALBERT......................... 35
CHANG, ALEXANDER................... 197
CHANG, AMY.............................. 1299, 1300
CHANG, ANGELA......................... 303
CHANG, DAVID............................ 218, 421, 730, 766, 767
CHANG, EDWARD......................... 101, 129, 647
CHANG, ELMER.............................. 449
CHANG, ENOCH............................. 652
CHANG, HELEN............................. 52
CHANG, JENNIFER....................... 317, 672
CHANG, JOHANNA....................... 1665, 2108
CHANG, KU JUEY......................... 43, 358, 359
CHANG, LAWRENCE....................... 65
CHANG, MICHAEL......................... 41
CHANG, STEVEN............................ 349
CHANG, TIMOTHY......................... 287
CHANG, TOM.94, 332, 436, 534, 640,
2345, 2531, 2571
CHANG, WILLIAM......................... 390, 391
CHANGCHIEN, ERIC...................... 766
CHANTALA, ELIZABETH.............. 601, 1930
CHOA, BRIAN............................... 194
CHAO, JAMES............................... 178, 694, 750
CHAPIN, DENISE......................... 1014
CHARLAT, MARTIN......................... 280
CHARLES COWAN, TRICIA.218, 433,
434
CHARP, KENNETH............... 1125
CHASE AVENUE FAMILY HEALTH
CCTS INC.................................812, 813, 814, 825
CHASE AVENUE FAMILY HEALTH
CCTS INC..............................26, 1092
CHASE, AVA LOU.........................1255
CHATFIELD, ALEXANDRA.190, 577,
1690, 1914
CHATHAM, OLIVIA.........................752
CHAU, CINDY.............................. 368
CHAU, JOHN............................... 625
CHAU, PETER............................... 2072
CHAUDHRI, YASHWANT.135, 539,
569, 718
CHAUDHURI, KALI.......................441, 442
CHAUHAN, SMIT......................... 660
CHAUHARA, OM........................... 449, 450
CHAUSSIE CASTRO, EKATERINA........1516
CHAVARRIA, JESSICA................. 1469
CHAVEZ SERRANO, VIOLETA.........760
CHAVEZ, ALEXANDRIA................. 601, 1931
CHAVEZ, BRIAN........................... 241
CHAWLA, ANUJ......................... 436, 508
CHEATHAM, BRITTANY............... 601, 1931
CHEGINI, SEPIDEH...................... 82
CHELIMILLA, HARITHA..................183
CHELVAKUMAR, GAYATHRI.........1916
CHEN, ALICE.287, 617, 1730, 1739, 1970,
CHEN, ANDREW............... 183, 574, 1673, 1911
CHEN, BRYAN............................... 613
CHEN, CHENG-HAN...................... 354, 365
CHEN, EILEEN.............................1426
CHEN, HAMILTON.204, 224, 431, 438,
722, 736
CHEN, HEATHER......................... 760
CHEN, JAMES............................... 482
CHEN, JENNIFER.........................1425, 1426
CHEN, KAREN............................. 672
CHEN, KATIE............................... 601
CHEN, LESLIE............................... 2400
CHEN, MARGARET......................... 30, 1153
CHEN, MAY................................. 427, 452, 454
CHEN, MING.................................1237
CHEN, SANFORD........................... 374
CHEN, SISI................................. 181
CHEN, STEVEN......................... 178, 694
CHENG, HOWARD.........................362
CHENG, KAREN......................... 317, 672, 1809, 2145,
2146
CHENG, KATHY......................... 248
CHENG, EULALIA.........................2106
CHENG, GEORGE.........................1746, 1996
CHENG, HOWARD.........................362
CHENG, KAREN.317, 672, 1809, 2145,
2146
<table>
<thead>
<tr>
<th>Name</th>
<th>Page Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHENG, WAYNE</td>
<td>522</td>
</tr>
<tr>
<td>CHENG, YU TSUN</td>
<td>1869, 2179</td>
</tr>
<tr>
<td>CHERRY, REENA</td>
<td>1794</td>
</tr>
<tr>
<td>CHESER, NICHOLAS</td>
<td>1804, 2132, 2275, 2296</td>
</tr>
<tr>
<td>CHETLAPALLI, SURYA</td>
<td>292</td>
</tr>
<tr>
<td>CHEUNG, SUNNY</td>
<td>726, 727</td>
</tr>
<tr>
<td>CHEVINSKY, MICHAEL</td>
<td>404</td>
</tr>
<tr>
<td>CHEW, WESLEY</td>
<td>2371</td>
</tr>
<tr>
<td>CHEWNING, RUSH</td>
<td>2146</td>
</tr>
<tr>
<td>CHIANG, JENNIFER</td>
<td>155, 530, 574</td>
</tr>
<tr>
<td>CHIAO, HILLENE</td>
<td>561</td>
</tr>
<tr>
<td>CHIARAPPA, FRANK</td>
<td>1825, 2179</td>
</tr>
<tr>
<td>CHIEN, JOHN</td>
<td>268</td>
</tr>
<tr>
<td>CHIEN, PEI</td>
<td>1815</td>
</tr>
<tr>
<td>CHIEN, SHELBY</td>
<td>327, 593</td>
</tr>
<tr>
<td>CHILAKA, SAMUEL</td>
<td>557, 752, 1881, 2214</td>
</tr>
<tr>
<td>CHIN, ERIC</td>
<td>508, 509</td>
</tr>
<tr>
<td>CHIN, MICHAEL</td>
<td>519, 520, 521</td>
</tr>
<tr>
<td>CHING, ANDREA SHERYL</td>
<td>733</td>
</tr>
<tr>
<td>CHING, TSUNG</td>
<td>34</td>
</tr>
<tr>
<td>CHIODI, MARTINA</td>
<td>506</td>
</tr>
<tr>
<td>CHIRANO, JASON</td>
<td>521</td>
</tr>
<tr>
<td>CHIRIBOGA, MEGAN ELISE</td>
<td>557, 1882</td>
</tr>
<tr>
<td>CHISHOLM, CHRISTOPHER</td>
<td>594</td>
</tr>
<tr>
<td>CHISHOLM, KAREN</td>
<td>2334</td>
</tr>
<tr>
<td>CHISUM, HELLEN</td>
<td>233</td>
</tr>
<tr>
<td>CHISWICK, GARY</td>
<td>1011, 1012, 1136, 1242, 1243, 1249, 1509, 1510</td>
</tr>
<tr>
<td>CHITKARA, PUJA</td>
<td>117, 140, 1639</td>
</tr>
<tr>
<td>CHIU, STEPHAN</td>
<td>299, 332, 1768, 1838, 2345, 2361, 2372</td>
</tr>
<tr>
<td>CHO, AARON</td>
<td>317, 672</td>
</tr>
<tr>
<td>CHO, ANTHONY</td>
<td>50</td>
</tr>
<tr>
<td>CHO, MICHAEL</td>
<td>259, 384, 463</td>
</tr>
<tr>
<td>CHOAN, CAROLINE</td>
<td>369</td>
</tr>
<tr>
<td>CHOATE, BERNADETTE</td>
<td>601, 1931</td>
</tr>
<tr>
<td>CHODAY, PRITI</td>
<td>34</td>
</tr>
<tr>
<td>CHOI, ANTHONY</td>
<td>595</td>
</tr>
<tr>
<td>CHOI, DAVID</td>
<td>244, 374, 426</td>
</tr>
<tr>
<td>CHOI, ESTHER</td>
<td>297, 636</td>
</tr>
<tr>
<td>CHOI, JI</td>
<td>238, 1882</td>
</tr>
<tr>
<td>CHOI, JIHOON</td>
<td>323, 689, 1825, 1826, 2186</td>
</tr>
<tr>
<td>CHOI, NATHALIE</td>
<td>287, 611, 1726, 1961</td>
</tr>
<tr>
<td>CHOI, RANA</td>
<td>240</td>
</tr>
<tr>
<td>CHOI-SIRIRATARIWAT, ISABELL</td>
<td>381, 382, 589</td>
</tr>
<tr>
<td>CHONG, AMY</td>
<td>2110</td>
</tr>
<tr>
<td>CHONG, ILSOON</td>
<td>61</td>
</tr>
<tr>
<td>CHONG, MARIBETH</td>
<td>17</td>
</tr>
<tr>
<td>CHONG, TIMOTHY</td>
<td>594</td>
</tr>
<tr>
<td>CHONG, YOO JIN</td>
<td>16, 17</td>
</tr>
<tr>
<td>CHONGKRAIRATAKUL, TEPSONI</td>
<td>625, 632</td>
</tr>
<tr>
<td>CHUU, SUN</td>
<td>1901, 2080, 2101</td>
</tr>
<tr>
<td>CHOU, BILL</td>
<td>1309, 1310</td>
</tr>
<tr>
<td>CHOU, WILLIAM</td>
<td>475</td>
</tr>
<tr>
<td>CHOUDRY, BILAL</td>
<td>98, 296, 731</td>
</tr>
<tr>
<td>CHOUDRY, QASIM</td>
<td>185</td>
</tr>
<tr>
<td>CHOW, BYRON</td>
<td>1155</td>
</tr>
<tr>
<td>CHOW, JASON</td>
<td>221, 436, 509, 733</td>
</tr>
<tr>
<td>CHOW, JENNIFER</td>
<td>639</td>
</tr>
<tr>
<td>CHOW, MAN HUNG</td>
<td>1547, 1548</td>
</tr>
<tr>
<td>CHRISTIANSEN, PATTI</td>
<td>184, 2266</td>
</tr>
<tr>
<td>CHRISTIANSON, WARREN</td>
<td>569, 763, 2284, 2285, 2324, 2325</td>
</tr>
<tr>
<td>CHRISTIE, CAMERON</td>
<td>261</td>
</tr>
<tr>
<td>CHRISTIE, PATRICIA</td>
<td>30, 1701</td>
</tr>
<tr>
<td>CHRISTY, TYLER</td>
<td>557, 752, 753, 1882, 2215</td>
</tr>
<tr>
<td>CHU, ANDREW</td>
<td>133, 191, 577</td>
</tr>
<tr>
<td>CHU, CHRISTOPHER</td>
<td>1664, 1689, 1864, 1905, 2099</td>
</tr>
<tr>
<td>CHU, ERIC</td>
<td>450</td>
</tr>
<tr>
<td>CHU, JAMES</td>
<td>512</td>
</tr>
<tr>
<td>CHU, WEIMING</td>
<td>390</td>
</tr>
<tr>
<td>CHUA, WILLY</td>
<td>739</td>
</tr>
<tr>
<td>CHUAN, SANDY</td>
<td>636</td>
</tr>
<tr>
<td>CHUANG, KAI-WEN</td>
<td>430</td>
</tr>
<tr>
<td>CHUDACEK, JANET</td>
<td>153, 1645</td>
</tr>
<tr>
<td>CHULA VISTA FAMILY HLTH CTR.</td>
<td>786, 787, 788, 789, 792, 793, 794, 795, 796, 797, 806</td>
</tr>
<tr>
<td>CHULA VISTA FAMILY HLTH CTR</td>
<td>21, 1038</td>
</tr>
<tr>
<td>CHULA VISTA PEDIATRICS</td>
<td>803, 804, 805</td>
</tr>
<tr>
<td>CHULA VISTA PEDIATRICS</td>
<td>... 1038</td>
</tr>
<tr>
<td>CHUN, DAVID</td>
<td>465</td>
</tr>
<tr>
<td>CHUN, HYUN</td>
<td>1310</td>
</tr>
<tr>
<td>CHUNG, ARTHUR</td>
<td>770</td>
</tr>
<tr>
<td>CHUNG, CHRISTINE</td>
<td>317, 672, 673</td>
</tr>
<tr>
<td>CHUNG, KION</td>
<td>596, 625, 628</td>
</tr>
<tr>
<td>CHUNG, LINDA</td>
<td>370</td>
</tr>
<tr>
<td>CHUNG, NATHAN</td>
<td>266</td>
</tr>
<tr>
<td>CHWA, JEFFREY</td>
<td>140, 1639</td>
</tr>
<tr>
<td>CIANCHIO, MARK</td>
<td>63</td>
</tr>
<tr>
<td>CIDAMBI, EMILY</td>
<td>1908, 2180</td>
</tr>
<tr>
<td>CIES, WILLIAM</td>
<td>550</td>
</tr>
<tr>
<td>CIOBANU, COSMINA</td>
<td>2296, 2297</td>
</tr>
<tr>
<td>CISTRONE, MONICA</td>
<td>720</td>
</tr>
<tr>
<td>CISZEK, ALEXANDRA</td>
<td>1883</td>
</tr>
<tr>
<td>CIZMAR, BRANISLAV</td>
<td>187, 712</td>
</tr>
<tr>
<td>CLAIREMONT HEALTHCARE AND WELLNESS CENTER LLC</td>
<td>781</td>
</tr>
<tr>
<td>CLANCY, JOHN</td>
<td>89</td>
</tr>
<tr>
<td>CLANCY, TARA</td>
<td>89</td>
</tr>
<tr>
<td>CLARK, CYNTHIA</td>
<td>753</td>
</tr>
<tr>
<td>CLARK, LORI</td>
<td>43</td>
</tr>
<tr>
<td>CLARK, MA BELEN</td>
<td>87</td>
</tr>
<tr>
<td>CLARK, MELISSA</td>
<td>683, 684, 1640, 1697, 2164</td>
</tr>
<tr>
<td>CLARK, SKYLAR</td>
<td>1577, 1578</td>
</tr>
<tr>
<td>CLARY, BRYAN</td>
<td>1820</td>
</tr>
<tr>
<td>CLAUDAT, KIMBERLY</td>
<td>1804, 2275</td>
</tr>
<tr>
<td>CLAVERIA, RICHARD</td>
<td>482</td>
</tr>
<tr>
<td>CLAY, CORRIE</td>
<td>1174, 1842</td>
</tr>
<tr>
<td>CLEEREMANS, BRUCE</td>
<td>253</td>
</tr>
<tr>
<td>CLEMENT, LUIS</td>
<td>2133, 2297</td>
</tr>
<tr>
<td>CLEMENTINO, NANCY</td>
<td>1134</td>
</tr>
<tr>
<td>CLOTFELTER, CHRISTINE</td>
<td>27</td>
</tr>
<tr>
<td>COBB, DAMON</td>
<td>1913</td>
</tr>
<tr>
<td>COBIAN, VANESSA</td>
<td>85, 183, 1142</td>
</tr>
<tr>
<td>COBURN, PIERRE</td>
<td>439, 518</td>
</tr>
<tr>
<td>COCCIA, MICHAEL</td>
<td>349</td>
</tr>
<tr>
<td>COCKERHAM, KIMBERLY</td>
<td>126</td>
</tr>
<tr>
<td>CODEN, DANIEL</td>
<td>2361</td>
</tr>
<tr>
<td>COFFEY, CHARLES</td>
<td>303, 647, 1775, 2056</td>
</tr>
<tr>
<td>COFFLER, ELIANE</td>
<td>291</td>
</tr>
<tr>
<td>COFFLER, MICKEY</td>
<td>560</td>
</tr>
<tr>
<td>COGGAN, JAMES</td>
<td>623</td>
</tr>
<tr>
<td>COHEN, BRAD</td>
<td>579</td>
</tr>
<tr>
<td>COHEN, CARA</td>
<td>1155</td>
</tr>
<tr>
<td>COHEN, DAVID</td>
<td>279, 280</td>
</tr>
<tr>
<td>COHEN, EDWARD</td>
<td>145, 148, 178, 179, 325, 343, 695</td>
</tr>
</tbody>
</table>
E. 服務提供者索引

COHEN, GARY................................. 592, 593
COHEN, MANSOUR.......................... 2032
COHEN, STEPHEN............................. 236
COHEN, ZACHARY.151, 179, 327, 556, 573, 594
C O L B U R N , KE I T H .......... 228, 441, 742
COLE, JASON.................................. 286, 610
COLEMAN, BROOKE.200, 223, 511, 735, 2358, 2400
COLEMAN, COLLEEN.......................... 266
COLEMAN, LORI.138, 195, 341, 669, 1634, 1695, 1845, 2142
COLEMAN, PAGE......................... 601, 1932
COLESON, PAMELA.......................... 190
COLLINS, BRIAN............................... 494
COLLINS, CATHLENE.1858, 1971, 2070
COLLINS, MICHAEL......................... 133, 340, 658
COLLINS, RESENA............................ 1767
COLLINS, WILLIAM........................... 1310, 1311
COLOGNE, SCOTT............................. 150
COMBS, MATTHEW........................... 32, 85
COMBS, WALTER............................. 85
COMMUNITY CARE CENTER............... 779
COMUNALE, RODERICK.58, 533, 1875
CONCENTRA URGENT CARE.............. 13, 14
CONCHA URIADAY ZAA, JANNY...... 342
CONCORS, ANDREW......................... 1469
CONE, STEPHANIE.1117, 1118, 1216, 1217, 1426
CONNER, PAMELA.282, 601, 1714, 1715, 1932
CONNER, RICHARD........................... 524, 750
CONNER, CAROLINE.282, 601, 1715, 1932
CONNER, JEFFREY............................. 2359
CONRAD, HEATHER........................... 2080
CONRAD, RANDALL........................... 2372
CONSTANTINO, STEPHANIE............. 1581
CONTRERAS, LORETTA...................... 1449
CONTRERAS, MICHELLE..................... 636
COOK, SHERYL............................... 1907, 2285
COOKISH, DAVID............................. 1794
COOPER, JAMES............................... 673
COOPER, MICHAEL.200, 511, 735, 2359, 2400
CORATE, LALAINIE......................... 315
CORBIN, DAVID................................ 83, 718
CORCORAN, KIMBERLY...................... 496
CORDERO, RAYMUND......................... 743, 773
Cordes, William............................ 1427
CORDOBA, MIGUEL............................ 1057
CORMAN, DANIEL......................... 1086, 1311
CORONA, FRANK............................... 569, 570
CORONADO, MYRNA......................... 714, 1526
CORREA, CARINA............................. 111
CORRY, ANDREA.............................. 166, 287, 611, 1083
CORTES, CHRISTINE....................... 611
CORTES, ELIZABETH....................... 553
CORTES, AARON.............................. 681, 2158
CORTES, JAIME.............................. 755, 2222
CORTIZO, ROSA.............................. 2203, 2319
CORIZV, NICOLAS............................ 1690
CORY, ALLISON............................... 557, 753, 2215
COSINO, ANJELICA........................... 1932
COSTALES, STEPHEN....................... 357
COSTELLO, DENNIS........................... 280
COSTELLO, MARK............................. 2159
COTTONWOOD CANYON
HEALTHCARE CENTER............... 778, 2240
COUGH, HEIDI............................... 255, 370, 371
COUGHLIN, DAVID......................... 1759, 2024, 2025
COURLADAHAN, JESSICA................. 1156
COUNCELBAUM, NANCY..................... 37
COUNTRY HILLS HEALTH CARE CENTER............... 2240
COUNTRY HILLS POST ACUTE.778, 2240
COUNTRY MANOR LA MESA
HEALTHCARE CENTER............... 779, 2244
COURIS, MICHAEL......................... 640
COVARRUBIAS, GRACIA................... 43, 52
COWAN, JOHN............................... 568
COX, JEREMY.199, 205, 216, 723, 728
COX, JUSTIN................................. 108, 596
COX, KEVIN................................. 340
COX, MATTHEW............................... 412
COX, VICTORIA............................... 28, 1142
COYER, MICHAEL............................. 262
COYNE, CHRISTOPHER...................... 617, 1971
CRAFT, KEVIN............................... 1644, 1699, 1925, 2211
CRANDAL, BRENTO................. 314, 1805, 2275
CRAWFORD, ELWARD...................... 1830
CRAWFORD-DAY, ANN..................... 717, 2321
CRAYCHEE, LEO.............................. 1594
CRIP, TAYLOR................................. 1794
CRISELL, MONISHA......................... 442, 525, 750
CRISOL, CAROLINE......................... 2297
CRITES, LAURA.............................. 653
CROCKETT, DENNIS......................... 259, 463, 590
CROSS, MICHAEL............................. 520
CROTTEO, ALEX............................... 753
CROWLEY, DONNA......................... 537
CROWLEY, DOUGLAS........................ 292
CRUZ RODRIGUEZ, JOSE.294, 628, 1752, 2004
CRUZ WHITLEY, JESSICA................. 295
CRUZ, GUADALUPE........................... 2262
CRUZ, MICHAEL............................ 1021, 1022, 1521
CRUZ, VANESSA.563, 758, 2286, 2325, 2326
CSAPCOZI, PETER......................... 625, 1359
CU-UJNIENG, ANDREW..................... 640
CU, BENNETT................................. 445
CU, NICOLE................................. 125, 639
CUBAS, IVAN................................. 156, 619, 620
CUENCA, ARNOLD........................... 50, 449
CULLEN, BENJAMIN......................... 658
CULOTTA, ANTHONY......................... 299, 436, 509
CUMMINGS, GEORGE.1069, 1070, 1126, 1127, 1470
CUMMINS, ANDREW......................... 620
CUNNINGHAM, ISIS......................... 1870
CUNNINGHAM, STEPHANIE................. 1702
CUNNINGHAM-AHUMADA, ROSE............. 460, 461
CURET, ZULMA............................... 1156, 1246
CURLEY, EDWARD......................... 567, 1238
CURRAN, BRIAN......................... 1707, 1918
CURRAN, PERRIN............................ 61
CURRY, JASON................................. 102, 567
CURTIS, DANIEL............................. 225
CURTIS, MEGAN............................... 1359
CUSACK, ANNE............................... 314
CUSHING, JAMES............................. 468
CUTCHON, SYDNEY......................... 1690
CUTLER, APRYL............................. 601
CUTLER, MICHAEL........................... 65, 81
CVAR, KATHRYN............................. 458
CVIJANOVIC, GORAN......................... 31
CYMBALUK, ANNA........................... 2098
E. 服務提供者索引

CZYPULL, MONICA..............282, 1715
DAVENDORF, STEPHEN..............442
DAVID, MARY LOU..............446
DAVID, TAL.........................689
DAVIDSON, JOHN.133, 538, 1632, 1877
DAIKES, SUMMER..............1715, 1716, 1933
DAVIS, BARBARA...............248
DAVIS, CHRISTOPHER.1683, 1859,
  2072
DAVIS, DEIRDRE...............66, 1312
DAVIS, JADE......................2400, 2401
DAVIS, JANET...............1933
DAVIS, JASON....................147, 295, 625, 632
DAVIS, KELLE.97, 116, 147, 157, 622,
  1602, 1614, 1643, 1647, 1990, 1991
DAVIS, KELLY...............453, 466, 467
DAVIS, MICHAEL...............436
DAVIS, MORGAN...............1418, 1419
DAVIS, STEPHANIE..............202, 255, 371
DAVIS, TRACIE..................158, 159, 331, 534, 636
DAWOD, FARAH...............107, 108, 327
DAY, CHRISTOPHER.............1217
DAY, ROBERT...................251, 368, 371
DE CARO, ROBERT...............225
DE CARVALHO, CARLOS.........75, 76
DE CASTRO, SHARLENE.........1870
DE DIOS, SARAH.282, 601, 1608, 1716,
  1933
DE LA ROSA, JOSE.............22, 1548
DE LA ROSA, RENATO...........22
DE LARA, KAROL JOHN...........601
DE LEON, ROBERT...............427, 428
DE MIK, TRAVIS.1046, 1107, 1185, 1186,
  1389, 1390, 1585
DE ROTHS, GEORGINE...........28, 66
DE SILVA, NIHAI................716, 2209
DE VERA, SARAH...............102
DEACON, CASSIE................2297, 2298
DEAN, MOENA.173, 336, 2330, 2340,
  2346, 2351, 2372, 2386, 2401
DEARING, DAVID.395, 396, 398, 399,
  773
DEBBOTTIS, DANIEL.............268
DECOCK, JAMES..................31
DECONDE, ADAM.303, 647, 1775, 1776,
  2056, 2057
DEDES, HOWARD...............468
DEEL, MARGARET...............30, 31
DEEMER, ANDREW..............571
DEIS, CRISTINA...............1611
DEISS, ROBERT...............1993
DEJBAKHSH, SHEILA............203, 371
DEKKERS-O’HARE, INGRID.....753
DEL AGUILA, FABIOLA.........2133, 2298
DEL CAMPO CASANELLES, MIGUEL.
  1989
DEL RE, AMANDA..............1166
DEL RE, ANGELO..............2080
DEL ROSARIO, GELA.534, 1875, 1876
DEL ROSARIO, PAMELA.....1756, 2014
DEL VECCHIO, MEGAN..........602, 1933
DELA PAZ, LENNIE.............58
DELA ROSA, KRISTINA...........613
DELANEY, CODY..................170
DELANEY, MICHAEL..98, 186, 576, 731
DEL CORE, LAURA.172, 297, 636, 637,
  1659, 1761, 2033
DELENGOCKY, TAYSON.126, 333, 534
DELNITZ, DANUTA..............50
DEMASCIO, MICHAEL...........1795
DEMOOR, PATRICIA.........1795
DENNIS, TSHEKEDI............472
DENNY-BROWN, SINAN..........386
DENTICO-OLIN, MARC..........2054
DENYSIAK, JACQUELINE..66, 74, 618
DEPAOLO, AMANDA..............2521
DEPORTO, TANYA...............763
DERISSI, DANA...............2121
DESAI, ASEEK....................445
DESAI, SONAM.................240
DESGRANGES, PATRICK.........170
DESPHANDE, KAVITA..........66, 67
DESILVA, GAYANI............428
DESILVA, PETER.................64
DESTA, TADDESE...............115, 156, 620
DEUTSCH, KAREN...............1934
DEVERA, GEMMIE..........1628, 1860, 2081
DEVEREUX, CHRISTOPHER.561, 562
DEVONSHIRE CARE CENTER....779
DEWING, JANNE...............41
DHANANI, YURZUL..............228
DHIKAR SURBER, SAPPHA.528, 602,
  1194, 1255, 1256
<table>
<thead>
<tr>
<th>Name</th>
<th>Page Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dhiman, Darshan</td>
<td>215, 219</td>
</tr>
<tr>
<td>Dhoot, Sonia</td>
<td>374, 586</td>
</tr>
<tr>
<td>Dia, Ali</td>
<td>161, 2262, 2322</td>
</tr>
<tr>
<td>Diamond Neighborhoods</td>
<td></td>
</tr>
<tr>
<td>Family Health Ctrs Inc.</td>
<td>931, 932, 933, 934, 935, 936, 946, 947, 948, 949, 956</td>
</tr>
<tr>
<td>Dijekic, Kristina</td>
<td>291, 624, 1746, 1997</td>
</tr>
<tr>
<td>Do, Elaine</td>
<td></td>
</tr>
<tr>
<td>Do, Angela</td>
<td>602, 1934</td>
</tr>
<tr>
<td>Doan, Nicolas</td>
<td>236</td>
</tr>
<tr>
<td>Doan, Angela</td>
<td>1354, 1355, 2111</td>
</tr>
<tr>
<td>Doan, Dora</td>
<td>645</td>
</tr>
<tr>
<td>Dobekic, Douglas</td>
<td>593</td>
</tr>
<tr>
<td>Dobyns, Jeffrey</td>
<td>467, 482</td>
</tr>
<tr>
<td>Dockery, Lee</td>
<td>2266</td>
</tr>
<tr>
<td>Dokter, Andi</td>
<td>684</td>
</tr>
<tr>
<td>Doctors Express of Oceanside Inc</td>
<td></td>
</tr>
<tr>
<td>Doezie, Allen</td>
<td>347</td>
</tr>
<tr>
<td>Doggett, Stephen</td>
<td>475</td>
</tr>
<tr>
<td>Dokich, Sretenka</td>
<td>1168, 1169</td>
</tr>
<tr>
<td>Dolland, Steven</td>
<td>286, 610, 1725, 1959</td>
</tr>
<tr>
<td>Dolmetsch, Jeanette</td>
<td>1450</td>
</tr>
<tr>
<td>Dolkak, Douglas</td>
<td>2298</td>
</tr>
<tr>
<td>Dombsky, Joseph</td>
<td>683</td>
</tr>
<tr>
<td>Dominguez, Dennis</td>
<td>1086, 1087</td>
</tr>
<tr>
<td>Dominguez, Fernando</td>
<td>1361</td>
</tr>
<tr>
<td>DON, Michelle</td>
<td>1789, 1790</td>
</tr>
<tr>
<td>Donaldson, Chadwick</td>
<td>101, 102, 647, 1603</td>
</tr>
<tr>
<td>Donaldson, Jared</td>
<td>200, 221, 509</td>
</tr>
<tr>
<td>Dong, Tammy</td>
<td>1058</td>
</tr>
<tr>
<td>Donlon, Ryan</td>
<td>496, 724</td>
</tr>
<tr>
<td>Donnell, Marti</td>
<td>60, 87, 560, 561, 756, 1226, 1227</td>
</tr>
<tr>
<td>Driver, Catherine</td>
<td>476</td>
</tr>
<tr>
<td>Driver, Valerie</td>
<td>681</td>
</tr>
<tr>
<td>Droker, Brian</td>
<td>98, 186, 296</td>
</tr>
<tr>
<td>Drue, Jack</td>
<td>493</td>
</tr>
<tr>
<td>Drury, Paul</td>
<td>353, 354, 365, 583, 585</td>
</tr>
<tr>
<td>Drzymalski, Monika</td>
<td>67</td>
</tr>
<tr>
<td>Dsouza, Nicole</td>
<td>629, 2299</td>
</tr>
<tr>
<td>Du, Sarah</td>
<td>102, 131, 654</td>
</tr>
<tr>
<td>Duarte, Kristen</td>
<td>1805, 2275, 2276</td>
</tr>
<tr>
<td>Dube, Bianca</td>
<td>1003</td>
</tr>
<tr>
<td>Dubois, Suja</td>
<td>620</td>
</tr>
<tr>
<td>Duck, Craig</td>
<td>27</td>
</tr>
<tr>
<td>Dudarewicz, Teresa</td>
<td>67</td>
</tr>
<tr>
<td>Duggan, Bridgette</td>
<td>622</td>
</tr>
<tr>
<td>Duggan, Daniel</td>
<td>482</td>
</tr>
<tr>
<td>Duggan, Veronica</td>
<td>203</td>
</tr>
<tr>
<td>Dulay, Joti</td>
<td>286, 610</td>
</tr>
<tr>
<td>Dummer, Kirsten</td>
<td>1859, 2072</td>
</tr>
<tr>
<td>Dunn, Joseph</td>
<td>227, 228</td>
</tr>
<tr>
<td>Dunn-Pirio, Anastasie</td>
<td>2025, 2299</td>
</tr>
<tr>
<td>Dunphy, Taylor</td>
<td>268</td>
</tr>
</tbody>
</table>

2464
### E. 服務提供者索引

<table>
<thead>
<tr>
<th>服務提供者索引</th>
<th>頁碼</th>
</tr>
</thead>
<tbody>
<tr>
<td>EISENBERG, STEVEN</td>
<td>623, 631</td>
</tr>
<tr>
<td>EDE, KEKOAA</td>
<td>192, 193</td>
</tr>
<tr>
<td>EIFRIG, CHARLES WILLIAM</td>
<td>374, 375, 550, 551</td>
</tr>
<tr>
<td>EINSTEIN, ERIC</td>
<td>113, 1609</td>
</tr>
<tr>
<td>EISMAN, SCOTT</td>
<td>170, 175</td>
</tr>
<tr>
<td>EKANAYAKE, PREETHIKA</td>
<td>617, 1976</td>
</tr>
<tr>
<td>EKHLOM, JANNA</td>
<td>611, 1962</td>
</tr>
<tr>
<td>EKLUND, BONNIE</td>
<td>557, 753</td>
</tr>
<tr>
<td>EKPNYONG, ATIM</td>
<td>2082</td>
</tr>
<tr>
<td>EL CAJON ADHC</td>
<td>2256</td>
</tr>
<tr>
<td>EL GHONEIMY, AHMED</td>
<td>26, 58, 76</td>
</tr>
<tr>
<td>EL SHERIEF, KARIM</td>
<td>556</td>
</tr>
<tr>
<td>EL-BERSHAWI, AHMED</td>
<td>248, 265</td>
</tr>
<tr>
<td>EL-HENAWI, IGLAL</td>
<td>33, 34</td>
</tr>
<tr>
<td>EL-MOGHRABI, NANCY</td>
<td>128, 536</td>
</tr>
<tr>
<td>EL-MOGHRABI, ROULA</td>
<td>128, 536, 645</td>
</tr>
<tr>
<td>ELBALALESY, NASER</td>
<td>254, 456, 457</td>
</tr>
<tr>
<td>ELFELT, TIMOTHY</td>
<td>506, 732</td>
</tr>
<tr>
<td>ELHOFY, ASHRAF</td>
<td>170</td>
</tr>
<tr>
<td>ELI, BRADLEY</td>
<td>173, 646</td>
</tr>
<tr>
<td>ELIAS, RAMIZ</td>
<td>26, 76</td>
</tr>
<tr>
<td>ELKAYAM, ISAK</td>
<td>85</td>
</tr>
<tr>
<td>ELKHOURY, FUAD</td>
<td>273, 404, 488, 591</td>
</tr>
<tr>
<td>ELKIND, JAE</td>
<td>1790</td>
</tr>
<tr>
<td>ELLEDGE, LINDSAY</td>
<td>294, 2276</td>
</tr>
<tr>
<td>ELLINI, AHMAD</td>
<td>465, 512, 513</td>
</tr>
<tr>
<td>ELLIS, ADAM</td>
<td>170</td>
</tr>
<tr>
<td>ELLIS, JOHN</td>
<td>726, 747</td>
</tr>
<tr>
<td>ELLNER, JULIE</td>
<td>686</td>
</tr>
<tr>
<td>ELO, KRISTIN</td>
<td>339, 1843</td>
</tr>
<tr>
<td>ELPEDES, BERNARD</td>
<td>448</td>
</tr>
<tr>
<td>ELSANADI, RAEF</td>
<td>40</td>
</tr>
<tr>
<td>ELSAYED, MOHAMMED</td>
<td>18, 1025</td>
</tr>
<tr>
<td>ELSAYED, SARAH SABRY</td>
<td>236</td>
</tr>
<tr>
<td>ELSSIY, PETER</td>
<td>232</td>
</tr>
<tr>
<td>ELSTER, JENNIFER</td>
<td>2101</td>
</tr>
<tr>
<td>EL-KONOSKE, RACHEL</td>
<td>166, 287, 611</td>
</tr>
<tr>
<td>ELZIK, MARK</td>
<td>482</td>
</tr>
<tr>
<td>EMERUWA, UKACHI</td>
<td>294, 631, 1754, 2007</td>
</tr>
<tr>
<td>EMPIE, KRISTEN</td>
<td>1174</td>
</tr>
<tr>
<td>ENCE, EMILY</td>
<td>654</td>
</tr>
<tr>
<td>ENCINITAS NURSING AND REHAB CTR</td>
<td>779, 2242</td>
</tr>
<tr>
<td>ENCOMPASS HEALTH REHABILITATION HOSPITAL OF MURRIETA</td>
<td>11</td>
</tr>
<tr>
<td>ENDSLEY, DELVIN</td>
<td>50</td>
</tr>
<tr>
<td>ENG, STEVE</td>
<td>93</td>
</tr>
<tr>
<td>ENGMAN, SUZANNE</td>
<td>412</td>
</tr>
<tr>
<td>ERIKSSON, CHRISTOPHER</td>
<td>613, 616</td>
</tr>
<tr>
<td>ERIKSSON, LISA</td>
<td>602, 1935, 1936</td>
</tr>
<tr>
<td>ERWTEMAN, ANDREW</td>
<td>522</td>
</tr>
<tr>
<td>ESCALANTE, JUVY</td>
<td>712</td>
</tr>
<tr>
<td>ESCAMILLA, KARLA</td>
<td>629</td>
</tr>
<tr>
<td>ESCONDIDO CARE CENTER</td>
<td>779, 2242</td>
</tr>
<tr>
<td>ESCONDIDO FAMILY HEALTH CENTER</td>
<td>839</td>
</tr>
<tr>
<td>ESCONDIDO FAMILY HEALTH CENTER</td>
<td>30, 1150</td>
</tr>
<tr>
<td>ESCHOIEE, MIRIAM</td>
<td>590</td>
</tr>
<tr>
<td>ESKANDARI, HAMID</td>
<td>31</td>
</tr>
<tr>
<td>ESKANDER, RAMEZ</td>
<td>169, 290, 563, 756</td>
</tr>
<tr>
<td>ESLAMI, BAHRAM</td>
<td>236, 237</td>
</tr>
<tr>
<td>ESLAMI-FARSANI, MAHMOUD</td>
<td>237, 249</td>
</tr>
<tr>
<td>ESLAMI, MEDI</td>
<td>299, 640</td>
</tr>
<tr>
<td>ESPARZA, SOPHIA</td>
<td>28</td>
</tr>
<tr>
<td>ESPELETA, VIDAL</td>
<td>391</td>
</tr>
<tr>
<td>ESPELETA, VIDAL</td>
<td>391</td>
</tr>
<tr>
<td>ESPINOSA-SILVA, YAMINAH</td>
<td>60, 87</td>
</tr>
<tr>
<td>ESSIEN, FRANCIS</td>
<td>743, 773, 774</td>
</tr>
<tr>
<td>ESTABROOK, LARA</td>
<td>165, 286</td>
</tr>
<tr>
<td>ESTAVILLO, SAUL</td>
<td>158, 715, 2300</td>
</tr>
<tr>
<td>ESTELLE, KIRA</td>
<td>740</td>
</tr>
<tr>
<td>ESTES, SAMANTHA</td>
<td>654</td>
</tr>
<tr>
<td>ESTRADA PATINO, ANGELA</td>
<td>194, 666, 1693, 2267</td>
</tr>
<tr>
<td>ESTRADA, JOHANNA</td>
<td>167, 715, 1527</td>
</tr>
<tr>
<td>ETTEFAGH, LEILA</td>
<td>541</td>
</tr>
<tr>
<td>EUBANY, JACQUELINE</td>
<td>445</td>
</tr>
<tr>
<td>EVANS, CATHERINE</td>
<td>286, 610</td>
</tr>
<tr>
<td>EVANS, ELISABETH</td>
<td>282</td>
</tr>
<tr>
<td>EVANS, RICHARD</td>
<td>515</td>
</tr>
<tr>
<td>EVANS, RYAN</td>
<td>511</td>
</tr>
<tr>
<td>EVE, WILLIAM</td>
<td>143</td>
</tr>
<tr>
<td>EVEORA, DARRYL</td>
<td>307, 650, 651</td>
</tr>
<tr>
<td>EWANK, CLIFTON</td>
<td>141</td>
</tr>
<tr>
<td>FABELLA, GABRIEL</td>
<td>76, 1361</td>
</tr>
<tr>
<td>FABIKANT, JORDAN</td>
<td>1966</td>
</tr>
<tr>
<td>FADAVI, HAMID</td>
<td>468</td>
</tr>
<tr>
<td>FADDA, GEORGE</td>
<td>329, 330</td>
</tr>
<tr>
<td>FAHIM, ASHRAF</td>
<td>700</td>
</tr>
<tr>
<td>FAHIMI, GOLSHAN</td>
<td>455</td>
</tr>
<tr>
<td>FAIQ, JAMILA</td>
<td>164, 496, 708</td>
</tr>
<tr>
<td>FAIRBANKS, TIMOTHY</td>
<td>1669, 1868, 1909, 2171</td>
</tr>
<tr>
<td>FAKHRO, SAMEEH</td>
<td>76</td>
</tr>
<tr>
<td>FALLBROOK FAMILY HLTH CTR</td>
<td>840, 842</td>
</tr>
<tr>
<td>FALLBROOK FAMILY HLTH CTR</td>
<td>840, 842</td>
</tr>
<tr>
<td>FALLBROOK SKILLED NURSING</td>
<td>779, 2243</td>
</tr>
</tbody>
</table>
E. 服务提供者索引

FAMBRO, CYNTHIA.............. 67, 1312, 1313
FAMILY HEALTH CTR IBARRA.890, 891, 892, 895, 954
FAMILY HEALTH CTR IBARRA, 72, 1342
FAMILY HEALTH CTR OF SD-ELM ST. .......................... 57, 1209
FAMILY HLTH CTR SD HILLCREST, ........................................ 72, 1344, 1345
FAN, LI ........................................ 576
FAN, ROBERT.......................... 500
FANNIN, HANAAH................ 102
FANOUS, ASHRAF.................. 193, 660
FARAMARZI, FARNAZ........... 735
FARASAT, SADAF................ 1361, 1362
FARAVARDEH, ARMAN... 329, 330, 625, 632
FARAZ ESLAMI, PARASTOO..... 458
FARHAT, KELLI.......................... 639
FARHIDVASH, FARIBA........ 123, 711, 731
FARID, NIKDOKHT............... 317, 673
FARINAS, LEAH..................... 686
FARJOUDI, FARHAD........... 183, 241, 359
FARMER, STEVEN.............. 161, 191, 201, 713
FARNsworth, William... 98, 186, 576, 731
FARRAR, COURTNEY.139, 196, 570, 681, 682, 1908, 2159, 2160
FARRELLY, ERIN.................... 268
FARRIS, REUBEN.................. 18, 21
FARSAD, Ramin............... 28
FARSHAMI, FATEMEH.............. 476
FARSHIDI, ARTA..................... 541
FARSHLER, ANTHONY.198, 432, 725, 1700
FARUQUE, TANIA............. 179
FARZIN, ABDUL.................... 499
FATHI, NAGHMEH............... 422
FATLAND, SARAH.............. 1227, 1228
FAZEL, NASIM................. 541
FAZELI, SOUDABEH.317, 673, 1809, 2146
FAZILAT, GOLAREH.............. 427
FE, ALEXANDER..................... 315
FEINBERG, STEVEN.............. 463
FEINER, JEFFREY................. 354, 365
FEIZI, SEDJ ................... 602
FEJLEH, ASHLEY.............. 1707, 1918
FEJLEH, MOHAMMAD........ 1740
FELD, KEREN.................... 1936
FELDMAN, GARY.............. 91, 92
FELDMAN, ROBERT............. 43
FELIX, FRANCISCO........... 225, 737
FELLION, LAUREN.............. 308
FENG, CHU-PEI...................... 475
FENNEMA, ERIC............... 223, 437
FERBER, JEFFREY.............. 88
FERNANDEZ LEYVA, JUAN..... 1014
FERNANDEZ, GENARO. 108, 119, 151, 327, 329, 532
FERNANDEZ, RAYMOND........ 43
FERNANDEZ, RODRIGO........ 121
FEROLIE, PAM..................... 602
FERRAIOLI, NATALIE... 1142, 1143, 1177
FERRANTE, JADE................. 240
FERRARA, SAMANTHA...... 339, 1843
FERRER, MIRON................. 320, 682
FERRITER, STACY............. 1725, 1960
FICK, DARYL....................... 620
FIELEDER, DEREK................. 182, 286, 610
FIELDMAN, GARY................. 91, 92
FILIPPO, LAUREN.............. 602
FINCH, CHRISTINA............. 683, 2106
FINN, DAPHNA................. 311, 2277
FIREIZEN, YARON.............. 2106
FIRESTONE, MICHELLE....... 2133, 2300
FIRESTEIN, CATHERINE... 291, 624
FISHER, CASEY.................... 556, 567, 573, 577
FISHER, JAY.......................... 2082
FISHER, JENNIFER.............. 623, 681
FISHER, SLOANE................. 1936
FISHER-GAMEZ, LORI......... 557
FLANIGAN, MARILYN....... 2282, 2301
FLEMING, WESLEY............. 683
FLEMING, DAVID............ 1192
FLEMING, JOHN............. 2385, 2423
FLEMING, SARAH.............. 1619, 2014
FLEMING, TARA................. 1119
FLEMING, WESLEY.............. 683
FLETCHER, EMILY.............. 1058
<table>
<thead>
<tr>
<th>Name</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>E.</td>
<td></td>
</tr>
<tr>
<td>FLINN, SCOTT</td>
<td>574, 1910</td>
</tr>
<tr>
<td>FLINT, JAMES</td>
<td>1826, 2181</td>
</tr>
<tr>
<td>FLISZAR, EVELYNE</td>
<td>317, 673</td>
</tr>
<tr>
<td>FLOOD, DAVID</td>
<td>690</td>
</tr>
<tr>
<td>FLORENCE, BRYNA</td>
<td>308</td>
</tr>
<tr>
<td>FLORES, BRUNO</td>
<td>688</td>
</tr>
<tr>
<td>FLORES, EDNA</td>
<td>169, 171, 294, 631</td>
</tr>
<tr>
<td>FLORES, ERNEST</td>
<td>1059</td>
</tr>
<tr>
<td>FLORES, JOE</td>
<td>1313</td>
</tr>
<tr>
<td>FLORES, TERAISA</td>
<td>50</td>
</tr>
<tr>
<td>FLYNN, DANIELLE</td>
<td>2203, 2319</td>
</tr>
<tr>
<td>FODDA, RAMI</td>
<td>708, 1478, 1479, 2193</td>
</tr>
<tr>
<td>FOLCH TORRES-AGUIAR, BEATRIZ</td>
<td>159, 534, 637, 1047, 1186, 1187, 1392, 1393, 1394, 1594, 1586</td>
</tr>
<tr>
<td>FONG, TSE LING</td>
<td>247</td>
</tr>
<tr>
<td>FORSECA, ROSANNA</td>
<td>182</td>
</tr>
<tr>
<td>FONTANA, LOUIS</td>
<td>714, 717, 2322</td>
</tr>
<tr>
<td>FORCIER, NANCY</td>
<td>1809, 2147</td>
</tr>
<tr>
<td>FOREMAN, TANYA</td>
<td>541, 542, 583, 584</td>
</tr>
<tr>
<td>FORRESTER, JARED</td>
<td>266</td>
</tr>
<tr>
<td>FORRESTER, MICHAEL</td>
<td>512</td>
</tr>
<tr>
<td>FORSMAN, SHANA</td>
<td>1137</td>
</tr>
<tr>
<td>FORTMANN, DANIEL</td>
<td>80</td>
</tr>
<tr>
<td>FORTUNE, ERIN</td>
<td>1428</td>
</tr>
<tr>
<td>FORZANI, CHRISTINA</td>
<td>2133, 2301</td>
</tr>
<tr>
<td>FOSTER, ANDREW DAVID</td>
<td>747</td>
</tr>
<tr>
<td>FOSTER, MARK</td>
<td>41</td>
</tr>
<tr>
<td>FOWLER, AARON</td>
<td>486</td>
</tr>
<tr>
<td>FOWLER, KATHRYN</td>
<td>317, 673, 674, 1810, 2147</td>
</tr>
<tr>
<td>FOX, DELANIE</td>
<td>439, 518</td>
</tr>
<tr>
<td>FOX, KENNETH</td>
<td>2188</td>
</tr>
<tr>
<td>FOYGELMAN, ALEKSANDR</td>
<td>659</td>
</tr>
<tr>
<td>FOYOUZI-YOUSEFI, NASTARAN</td>
<td>618, 621</td>
</tr>
<tr>
<td>FRAGOSO, DOMINIQUE</td>
<td>158, 2262</td>
</tr>
<tr>
<td>FRAKES, LAURIE</td>
<td>171, 623, 631, 710</td>
</tr>
<tr>
<td>FRANCIS, CATHERINE</td>
<td>472</td>
</tr>
<tr>
<td>FRANCIS, LARRY</td>
<td>421, 1847</td>
</tr>
<tr>
<td>FRANK, GUIDO</td>
<td>2301</td>
</tr>
<tr>
<td>FRANK, STEWART</td>
<td>76</td>
</tr>
<tr>
<td>FRANKLIN RUTLAND, CEDRIC</td>
<td>203</td>
</tr>
<tr>
<td>FRANKLIN, ADAM</td>
<td>591</td>
</tr>
<tr>
<td>FRANKWICH, KAREN</td>
<td>448</td>
</tr>
<tr>
<td>FRASIER, BRADLEY</td>
<td>572</td>
</tr>
<tr>
<td>GABEL, CHRISTINA</td>
<td>357</td>
</tr>
<tr>
<td>GADIPATI, KISHORE</td>
<td>620</td>
</tr>
<tr>
<td>GADIYARAM, VARUNA</td>
<td>292, 626</td>
</tr>
<tr>
<td>GADRE, ABHISHEK</td>
<td>175</td>
</tr>
<tr>
<td>GAFFEY, ANN</td>
<td>1821</td>
</tr>
<tr>
<td>GAGLANI, RAHUL</td>
<td>505</td>
</tr>
<tr>
<td>GAHM, CLAIRE</td>
<td>2082</td>
</tr>
<tr>
<td>GAIIKWAD, SHILPA</td>
<td>24</td>
</tr>
<tr>
<td>GAINOR, ANDREA</td>
<td>308</td>
</tr>
<tr>
<td>GALKO, BARBARA</td>
<td>93</td>
</tr>
<tr>
<td>GALLARES, DANIEL</td>
<td>1182</td>
</tr>
<tr>
<td>GALLO, LINDA</td>
<td>137, 1633, 2259</td>
</tr>
<tr>
<td>GALANT, DANIEL</td>
<td>539, 666</td>
</tr>
<tr>
<td>GALASSO, MADISON</td>
<td>113, 1610</td>
</tr>
<tr>
<td>GALLEMEZ, ANDREA</td>
<td>308</td>
</tr>
<tr>
<td>GANDHI, SHEETAL</td>
<td>1169</td>
</tr>
<tr>
<td>GANDHI, JODIE</td>
<td>465</td>
</tr>
<tr>
<td>GANESAN, ANUSHA</td>
<td>2102</td>
</tr>
<tr>
<td>GANGEI, SHAZMIN</td>
<td>190, 1691</td>
</tr>
<tr>
<td>GANTA, SANYASI</td>
<td>32, 84</td>
</tr>
<tr>
<td>GANTA, SRIJAN</td>
<td>2188</td>
</tr>
<tr>
<td>GARA, NAVEEN</td>
<td>183, 1673</td>
</tr>
<tr>
<td>GARBER, MARC</td>
<td>105, 570, 764</td>
</tr>
<tr>
<td>GARCIA, CALVIN</td>
<td>1725, 1960</td>
</tr>
<tr>
<td>GARCIA, CARLOS</td>
<td>23, 1059</td>
</tr>
<tr>
<td>GARCIA, DEANA</td>
<td>1450, 1451</td>
</tr>
<tr>
<td>GARCIA, JASON</td>
<td>439</td>
</tr>
<tr>
<td>GARCIA, JENNIX</td>
<td>2006, 2302</td>
</tr>
<tr>
<td>GARCIA, JOHNNY</td>
<td>1074, 1256, 1257</td>
</tr>
<tr>
<td>GARCIA, KARLA</td>
<td>18, 1025</td>
</tr>
<tr>
<td>GARCIA, RAFAEL</td>
<td>1059, 1217</td>
</tr>
<tr>
<td>GARCIA, REGINA</td>
<td>2194</td>
</tr>
<tr>
<td>GARCIA, RICHARD</td>
<td>2301</td>
</tr>
<tr>
<td>GARCIA, ROSEMARIE</td>
<td>2264</td>
</tr>
<tr>
<td>GARCIA, TADYSIA</td>
<td>1516</td>
</tr>
<tr>
<td>GARCIA-SANDOVAL, DAMARIS</td>
<td>715, 2206</td>
</tr>
<tr>
<td>GARDNER, KRISTA</td>
<td>302, 761</td>
</tr>
<tr>
<td>GARDNER, STEPHEN</td>
<td>482</td>
</tr>
<tr>
<td>GARFF, KEVIN</td>
<td>300, 712, 2421</td>
</tr>
<tr>
<td>GARFINKLE, REBECCA</td>
<td>411, 412</td>
</tr>
<tr>
<td>GARGULINSKI, MATTHEW</td>
<td>523</td>
</tr>
<tr>
<td>GARIIVAN, VARTAN</td>
<td>596, 1251</td>
</tr>
<tr>
<td>GARNER, KAREN</td>
<td>65</td>
</tr>
<tr>
<td>GARTH, MELISSA</td>
<td>1717, 1936</td>
</tr>
<tr>
<td>GARVIN, JOSEPH</td>
<td>181</td>
</tr>
</tbody>
</table>
E. 服务提供者索引

GAULT, MICHAEL ........................................ 365
GAUSEPOHL, MARY ........................................ 513
GAVRILYUK, IGOR ........................................ 76
GAVRILYUK, OLEG ........................................ 652
GAYAM, SAJJAN ........................................... 278, 593
GE, NENGJIE .................................................. 256, 257
GE, NORMAN .................................................. 259
GEBHARD, KARL ............................................. 50, 51
GEE, JENNIFER .............................................. 422, 455
GEE, BRUCE .................................................... 2359, 2426
GIBONEY, JENNIFER ........................................ 651, 2082, 2112
GIBSON, JULIA .............................................. 720
GIBER, ANTON .................................................. 79
GIL, GABRIEL ................................................. 67, 68
GILANI, SAPIDEH ........................................... 304, 647, 1777, 1778, 2058
GILBERT, CHRISTOPHER .................................. 184, 1674
GILBOA, RUTH ................................................. 198, 559, 709, 718, 719
GILES, GREGORY ............................................ 2373
GILIBERTO, JOSEPH ....................................... 529, 612, 1292, 1293, 1872, 1965
GILLAN, JAMES .............................................. 174
GILLAN, SANDRA ........................................... 174
GILLILAND, TYLER ........................................ 320
GILLMAN, MICHAEL ......................................... 349
GILROY, LAURA ............................................. 2272
GIM, RONALD ................................................. 354, 365
GIORGI, ASHLEY ............................................. 602, 1936
GIOVANNETTI, ERIN ....................................... 282, 1717
GISH, ROBERT .................................................. 531, 620, 1094, 1212, 1355
GISI, SYLVIA .................................................... 87
Gittings, Daniel ............................................. 268, 269
GIURGIU, DAN ................................................. 686
GLADSJO, JULIE ............................................. 166, 614
GLASSER, DANIEL ........................................... 568, 762
GLASSER, MARGA ............................................ 105, 106
GLASSMAN, JERROLD ...................................... 597, 628
GLEASON ROHRER, GWEN ................................ 1313, 1314
GLEICH, JULIA ................................................. 660
GLENN, TARA ................................................... 2014
GLICKMAN, SAMUEL ....................................... 315
GLOBUS, JEFFREY ............................................ 51
GODDARD, SHANNON ....................................... 1192, 1193
GODINEZ, BRENDAN ....................................... 564, 758
GOEB, YANNICK ............................................. 323, 690, 1826, 2181
GOEL, GUNJAN .................................................. 688
GOGGIN, SAMANTHA ....................................... 1429
GOHIL, RAJIT ................................................... 32, 33, 48
GOKHROO, RAHUL .......................................... 216, 433
GOLD, JEFFREY ............................................... 1677, 1853, 1854, 2026
GOLD, MARGARET ............................................ 39
GOLDFINGER, SARAH ..................................... 1257
GOLDING, IAN .................................................. 2073
GOLDBERG, ROBERT .......................................... 2351
GOLD, MARGARET ............................................ 39
GOODWIN, RACHEL .......................................... 1727, 1962
GOODRICH, ANDREW ....................................... 1731
GOODWIN, RACHEL .......................................... 1727, 1962
GORDON, BRENT ............................................. 2073
GORDON, CHRISTOPHER .................................... 1087
GORDON, DANIELLE ......................................... 603, 720
GORDON, JUSTIN ............................................. 155, 530
GORE, GWENDOLYN .......................................... 64, 581
GORGES, RANDA ............................................. 1096
GOMEZ, DANIELLA ........................................... 2208, 2209
GOMEZ, GUILLERMO ......................................... 421, 732
GOMEZ, JAVINITA ............................................. 2248, 2249, 2302
GOMEZ, LESLIE .............................................. 282, 603, 1717, 1718, 1937
GONZALES, DARRELL ......................................... 287
GONZALES, ANDRES .......................................... 163, 1652, 2193
<table>
<thead>
<tr>
<th>Name</th>
<th>Page Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Haftbaradaran Mohammadi, Afsaneh</td>
<td>369</td>
</tr>
<tr>
<td>Haghghi Motlagh, Behnaz</td>
<td>45, 46</td>
</tr>
<tr>
<td>Haghverdian, Brandon</td>
<td>269</td>
</tr>
<tr>
<td>Hahn, Lewis</td>
<td>317, 674</td>
</tr>
<tr>
<td>Hahn, Michael</td>
<td>317, 674</td>
</tr>
<tr>
<td>Hai, Faiz</td>
<td>1353</td>
</tr>
<tr>
<td>Haider, Uzma</td>
<td>212, 432, 433</td>
</tr>
<tr>
<td>Haider, Sandra</td>
<td>470</td>
</tr>
<tr>
<td>Haider, Shanzay</td>
<td>212, 433</td>
</tr>
<tr>
<td>Haider, Uzma</td>
<td>212, 432, 433</td>
</tr>
<tr>
<td>Haigh, Bruce</td>
<td>333, 535, 1838, 1839, 1876, 2374, 2387</td>
</tr>
<tr>
<td>Hail, Neil</td>
<td>80</td>
</tr>
<tr>
<td>Hall, Andrew</td>
<td>17</td>
</tr>
<tr>
<td>Hall, Jacob</td>
<td>99, 731</td>
</tr>
<tr>
<td>Hall Dorson, Jeffrey</td>
<td>686</td>
</tr>
<tr>
<td>Halperin, Jason</td>
<td>90, 2224</td>
</tr>
<tr>
<td>Halpern, David</td>
<td>96, 283</td>
</tr>
<tr>
<td>Halvorson, Paula</td>
<td>1701</td>
</tr>
<tr>
<td>Hamdan, Ayad</td>
<td>1743</td>
</tr>
<tr>
<td>Hamed, Jacqueline</td>
<td>198, 1699</td>
</tr>
<tr>
<td>Hamid, Wahida</td>
<td>1074, 1645</td>
</tr>
<tr>
<td>Hamidi Asl, Kamran</td>
<td>348</td>
</tr>
<tr>
<td>Hamidi, Afshin</td>
<td>581</td>
</tr>
<tr>
<td>Hamidi, Mahshid</td>
<td>68</td>
</tr>
<tr>
<td>Hamilton, Anita</td>
<td>241</td>
</tr>
<tr>
<td>Hamilton, Joanne</td>
<td>472, 473</td>
</tr>
<tr>
<td>Hamilton, Lisa Marie</td>
<td>1143, 1315, 1316</td>
</tr>
<tr>
<td>Hamm, Deanna</td>
<td>629</td>
</tr>
<tr>
<td>Hamman, Michael</td>
<td>614</td>
</tr>
<tr>
<td>Hammel, Nathan</td>
<td>178</td>
</tr>
<tr>
<td>Hammes, John</td>
<td>147, 626, 632</td>
</tr>
<tr>
<td>Hammett, Erin</td>
<td>22, 140, 1041, 1042</td>
</tr>
<tr>
<td>Hammond, Charles</td>
<td>291, 624</td>
</tr>
<tr>
<td>Hammond, Heather</td>
<td>154, 182</td>
</tr>
<tr>
<td>Hamoui, Nahid</td>
<td>252, 266</td>
</tr>
<tr>
<td>Hamouie, Judy</td>
<td>437, 2340, 2346, 2352, 2374</td>
</tr>
<tr>
<td>Hamzei, Ali</td>
<td>162, 279</td>
</tr>
<tr>
<td>Han, Amy</td>
<td>614</td>
</tr>
<tr>
<td>Han, Angela</td>
<td>2194</td>
</tr>
<tr>
<td>Han, James</td>
<td>569</td>
</tr>
<tr>
<td>Han, Kyoung</td>
<td>133, 191, 577, 1914</td>
</tr>
<tr>
<td>Han, Sul Ki</td>
<td>160, 337, 645</td>
</tr>
<tr>
<td>Han, Sulki</td>
<td>2340, 2374</td>
</tr>
<tr>
<td>Hanagami, Cori</td>
<td>661</td>
</tr>
<tr>
<td>Handler, Barry</td>
<td>694</td>
</tr>
<tr>
<td>Handler, Suzanne</td>
<td>640</td>
</tr>
<tr>
<td>Handley, Karen</td>
<td>473</td>
</tr>
<tr>
<td>Handwerker, Jason</td>
<td>318, 674</td>
</tr>
<tr>
<td>Hanjan, Tiva</td>
<td>468, 483</td>
</tr>
<tr>
<td>Hanley, Lauren</td>
<td>1047, 1048, 1108, 1187, 1395, 1396, 1586</td>
</tr>
<tr>
<td>Hanna, Andrew</td>
<td>387</td>
</tr>
<tr>
<td>Hanna, Karen</td>
<td>765</td>
</tr>
<tr>
<td>Hanna, Lindsay</td>
<td>283, 1718</td>
</tr>
<tr>
<td>Hannawi, Andrew</td>
<td>2027</td>
</tr>
<tr>
<td>Hanssun, Gemmy</td>
<td>1810, 2148</td>
</tr>
<tr>
<td>Hanono, Abraham</td>
<td>2360</td>
</tr>
<tr>
<td>Hanono, Helfon</td>
<td>2360</td>
</tr>
<tr>
<td>Hansen, Christina</td>
<td>150, 308</td>
</tr>
<tr>
<td>Hansen, Doyle</td>
<td>155</td>
</tr>
<tr>
<td>Hansen, John</td>
<td>1430</td>
</tr>
<tr>
<td>Hansink, Raymond</td>
<td>703</td>
</tr>
<tr>
<td>Hanson, Adrienne</td>
<td>740</td>
</tr>
<tr>
<td>Harpe, Elena</td>
<td>1471</td>
</tr>
<tr>
<td>Hardin, Jeremy</td>
<td>287</td>
</tr>
<tr>
<td>Hardison, Charles</td>
<td>579</td>
</tr>
<tr>
<td>Hare, Marc</td>
<td>113, 183, 617</td>
</tr>
<tr>
<td>Harford, Robert</td>
<td>211</td>
</tr>
<tr>
<td>Harfouch, Chawki</td>
<td>504</td>
</tr>
<tr>
<td>Hargrove, Rachel</td>
<td>402</td>
</tr>
<tr>
<td>Harianawala, Salim</td>
<td>265</td>
</tr>
<tr>
<td>Harkness, Rumiko</td>
<td>1718, 1938</td>
</tr>
<tr>
<td>Harman, Jacy</td>
<td>439, 440</td>
</tr>
<tr>
<td>Harney, Jenna</td>
<td>654</td>
</tr>
<tr>
<td>Harmis, Natasha</td>
<td>717, 1573</td>
</tr>
<tr>
<td>Harms, Monica</td>
<td>42</td>
</tr>
<tr>
<td>Haroush, Gal</td>
<td>1938</td>
</tr>
<tr>
<td>Harpel, Sheryl</td>
<td>1075</td>
</tr>
<tr>
<td>Harrah, William</td>
<td>682</td>
</tr>
<tr>
<td>Harrell-Burder, Beverly</td>
<td>113, 617, 1610</td>
</tr>
<tr>
<td>Harrington, Barbara Lorraine</td>
<td>1258, 1259</td>
</tr>
<tr>
<td>Harrington, John</td>
<td>163</td>
</tr>
<tr>
<td>Harris, Christina</td>
<td>654</td>
</tr>
<tr>
<td>Harris, Genevieve</td>
<td>279, 595</td>
</tr>
<tr>
<td>Harris, Jeffrey</td>
<td>304, 648, 1779, 1780, 2059</td>
</tr>
<tr>
<td>Harris, Laura</td>
<td>184, 2247</td>
</tr>
<tr>
<td>Harris, Lisa</td>
<td>1767</td>
</tr>
<tr>
<td>Harris, Matthew</td>
<td>351</td>
</tr>
<tr>
<td>Harris, Pamela</td>
<td>1642, 1883, 2216</td>
</tr>
<tr>
<td>Harrisson, Amy</td>
<td>33, 49, 552</td>
</tr>
<tr>
<td>Harsolia, Asif</td>
<td>393</td>
</tr>
<tr>
<td>Hart, Becky</td>
<td>1938</td>
</tr>
<tr>
<td>Hart, Marquis</td>
<td>686</td>
</tr>
<tr>
<td>Hartford, Nicole</td>
<td>1599</td>
</tr>
<tr>
<td>Hartman, Andrew</td>
<td>571</td>
</tr>
<tr>
<td>Hartman, Julie</td>
<td>496, 724</td>
</tr>
<tr>
<td>Hartmann, Phillip</td>
<td>2099</td>
</tr>
<tr>
<td>Harvey, Delfina</td>
<td>603</td>
</tr>
<tr>
<td>Harvey, Scott</td>
<td>297, 637, 1762, 2035, 2036</td>
</tr>
<tr>
<td>Hasan, AWS</td>
<td>289, 620, 1740, 1741, 1986</td>
</tr>
<tr>
<td>Hasan, Bushra</td>
<td>496, 724</td>
</tr>
<tr>
<td>Hase, Kathleen</td>
<td>182</td>
</tr>
<tr>
<td>Hasegawa, Chris</td>
<td>1796, 2123</td>
</tr>
<tr>
<td>Hashem, Shiva</td>
<td>1019</td>
</tr>
<tr>
<td>Hashemi, Emad</td>
<td>255</td>
</tr>
<tr>
<td>Hassen, Sarah</td>
<td>362</td>
</tr>
<tr>
<td>Hassanein, Tarek</td>
<td>115, 116, 156, 183, 585, 620</td>
</tr>
<tr>
<td>Hastanan, Carol</td>
<td>1088</td>
</tr>
<tr>
<td>Haste, Elizabeth</td>
<td>626, 1998</td>
</tr>
<tr>
<td>Hattangi Gluth, Jona</td>
<td>138, 176, 316, 669, 2142</td>
</tr>
<tr>
<td>Hauff, Samantha</td>
<td>648</td>
</tr>
<tr>
<td>Haupt, David</td>
<td>553</td>
</tr>
<tr>
<td>Hawkins, Melissa</td>
<td>759, 2223</td>
</tr>
<tr>
<td>Hawley, Daniel</td>
<td>318, 674</td>
</tr>
<tr>
<td>Hayton, Tammy</td>
<td>507</td>
</tr>
<tr>
<td>Hazan, Alison</td>
<td>654</td>
</tr>
<tr>
<td>Hazelbaker, Paul</td>
<td>1363</td>
</tr>
<tr>
<td>Head, Kristin</td>
<td>1653, 1671, 1850, 1883, 1938</td>
</tr>
<tr>
<td>Headley, Alison</td>
<td>634</td>
</tr>
<tr>
<td>Hebreo, Joseph</td>
<td>185, 186</td>
</tr>
<tr>
<td>Hehe, Kyle</td>
<td>93, 470, 590</td>
</tr>
<tr>
<td>Heifetz, Susan</td>
<td>61</td>
</tr>
<tr>
<td>Heimler, Graham</td>
<td>68</td>
</tr>
</tbody>
</table>
E. 服務提供者索引

HEN, BRIAN ........................................... 43
HEN, REBECCA .................................. 68
HEINRICH, JAMES ....................... 463, 464
HEINRICI, ALEAKA ....... 68, 592, 1316, 1528
HEKMAT, RAZI .................................. 59, 1212
HEMET GLOBAL MEDICAL CENTER. ..................................................................... 11, 779
HEMP, JAMES .................................. 694
HEMPERLY, STEPHEN ............... 167, 614
HENDERSON, GREGORY 542, 755, 756
HENDERSON, PHILIP .................... 1363
HENDERSON, RODNEY ..................... 343
HENDERSON, TREVOR ..................... 1431
HENDRICKS, MARK ............................ 77
HENDRIX, JEFFERSON ..................... 1528
HENLEY, MEARA ............................. 1480, 1481
HENNEIN, LAUREN 300, 1661, 1680, 1856, 1895, 2045
HENNINGER, DELMER ...................... 516
HENRICK, ANDREW 348, 375, 376
HENRY, ANEEL ..................................... 77
HENRY, BRIAN ...................................... 43
HENRY, REBECCA ............................... 68
HEPNER, ABSALOM ......................... 445
HERMAN, ANDREA ...................... 1568
HERMAN, RACHEL 139, 233, 539, 1636
HERMAN, SAM ................................. 16, 87
HERMANSON, KATHLEEN 102, 1603
HERMES, MARY ............................... 1471
HERNANDEZ, CRISTINA 287, 1731, 1972
HERNANDEZ, JESSICA 1884, 2217
HERNANDEZ, JOANNA ..................... 1202
HERNANDEZ, MARCO 419, 420
HERNANDEZ, MIRIAM ....................... 2202
HERNANDEZ, RALPH 18, 81, 1529, 1612
HERNANDEZ, SILVIA ............................ 2302
HERR, COLLEEN ................................. 164
HERR, RAYMOND ............................... 659
HERRERA, CHARITY ............................. 180, 595
HERSEVOORT, SHAWN ................. 661
HERSH, LINDSEY ................................. 217
HERSKOVITZ, SCOTT ......................... 2083
HETTIG, JUDITH ............................... 1075, 1259
HEURING, JULIE .................................. 283
HEYMAN, BENJAMIN 1743, 1744
HIBBS, NICOLE ................................. 1431
HICKS, TOMMY ..................................... 41
HIETALATI, SAMANTHA 1756, 2014
HIGGINS, DAWN ............................... 440
HIGGINS, JOSHUA 174, 308, 309, 654, 1666, 1796, 2123
HIGH TOWER, GEORGE ....................... 614
HIGUERA, EDITH ............................... 537, 654
HILAL, TARIQ ...................................... 387
HILDRETH, AMBER ......................... 1986
HILL, CARLA 717, 1578, 2210
HILL, GENIELYN 603, 1259, 1260, 1939
HILL, KAITLYN ................................. 172, 298
HILL, LINDA 619, 1465, 1466, 1981
HILL, RYAN ................................. 88, 756, 2223
HILL, TARIQ ........................................... 387
HILDRETH, AMBER .............................. 1986
HILLCREST HEIGHTS HEALTHCARE CENTER. ............................................. 781, 2249
HILLDALE HABILITATION CENTER. .... 2245
HILLER, ASHLEY .................................. 513
HILLIARD, THEASALONICA 603, 1260, 1939
HINCHLIFF, KATHARINE 1828, 2185, 2186
HINKLE, CORINNE .............................. 339, 1844
HINSHAW, PAUL 187, 1678, 1679, 2199
HIRSCH, JENNIFER .............................. 1727, 1963
HIXSON, THOMAS .............................. 2374
HLAVAC, SANDRA .................................. 724
HO, ALAN ............................................ 350, 351
HO, AMIEE 1625, 2362, 2402
HO, GILBERT ................................. 99, 576
HO, GILBERT ................................. 99, 576
HO, HOANG ................................. 2402
HO, HOANG 654, 655
HO, HOANG MINH .............................. 645
HO, LARRY ........................................... 235
HO, MYLIEN ........................................... 1108
HO, TAMMY 274, 405, 488, 591
HO, TRAM ............................................ 2334
HOAG CLINIC ......................................... 14
HOAG HOSPITAL IRVINE ...................... 11
HOAG ORTHOPEDIC INSTITUTE ........... 11
HOAGLAND, PETER 105, 592
HOANG, CHI ......................................... 1260
HOANG, KENNY 2385, 2423
HOANG, KEVIN .................................. 2403
HOANG, MAI 1763, 2036
HOANG, VY 1119, 1431
HOCHEMBERGER, WILLIAM ........... 700
HODGKIN, EDWARD ............................ 1088
HOFMEISTER, ERIC ............................. 144, 690
HOGAN, ROSELYNN JOY ...................... 1261
HOGARTH, MICHAEL ......................... 1747, 1998
HOGUE, BRENNIA 288, 617, 1732, 1972
HOLDEN, MARC .................................. 696
HOLLEMAN, KEVIN 185, 193, 630, 661
HOLLICK, NATALIE .............................. 1060
HOLM, WILLIAM ................................. 552
HOLMER, ARIELA ............................... 1741
HOLMSTROM, STEVEN .......................... 95
HOLNESS, RONALD ............................ 396
HOM, DAVID 304, 305, 648, 1780, 2060
HOM, GREGORY ................................. 2403
HOM, KATHERINE ............................... 435
HOM-TEDLA, MARIANNE 1763, 2036
HOMESLEY, SUSAN ......................... 2396
HONG, ANDREW ................................. 79
HONG, ERIC ......................................... 280
HONG, HEE KYUNG ......................... 238
HONG, JOHN ......................................... 199
HONOLD, JOSE ................................. 2015
HOO, PAMELA 302, 1771, 2362, 2403
HOO, TRAM ............................................ 2334
HOO, VY .............................................. 1119, 1431
HORNEY, KRISTAN ............................. 1261
HORNBEAK, KIRSTEN ............. 1732, 1972
HORNER, HEATHER 96, 106, 147, 151, 180, 327, 595
HORNEY, KRISTAN ............................. 1261
HORNBEAK, KIRSTEN ............. 1732, 1972
HORNER, HEATHER 96, 106, 147, 151, 180, 327, 595
<table>
<thead>
<tr>
<th>Name</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOSEIN ZADEH MALEKI, ANA</td>
<td>123, 711, 712, 1623, 2198</td>
</tr>
<tr>
<td>HOSSEINI, ALIREZA</td>
<td>241, 242, 448</td>
</tr>
<tr>
<td>HOUGHTON, ROBERT</td>
<td>68</td>
</tr>
<tr>
<td>HOURANI, RAYAN</td>
<td>108, 152, 597</td>
</tr>
<tr>
<td>HOURIAN, KEITH</td>
<td>1848</td>
</tr>
<tr>
<td>HOUSELY, ALEXIS</td>
<td>320, 1815</td>
</tr>
<tr>
<td>HOVASANJIAN, JOHN</td>
<td>376, 587</td>
</tr>
<tr>
<td>HOWARD, NATHAN</td>
<td>33</td>
</tr>
<tr>
<td>HOWE, STEVEN</td>
<td>1822, 1868, 1869, 2212</td>
</tr>
<tr>
<td>HOWELL, AMANDA</td>
<td>557, 558, 753</td>
</tr>
<tr>
<td>HOWELL, STACEY</td>
<td>249, 250</td>
</tr>
<tr>
<td>HOXMEIER, KRISTA</td>
<td>1451</td>
</tr>
<tr>
<td>HSIAO, ALBERT</td>
<td>318, 674</td>
</tr>
<tr>
<td>HSIEH, TUNG CHIN</td>
<td>1830</td>
</tr>
<tr>
<td>HSING, ANDREW</td>
<td>175, 763</td>
</tr>
<tr>
<td>HSU, ANDREW</td>
<td>141, 142</td>
</tr>
<tr>
<td>HSU, BRADFORD</td>
<td>141, 142</td>
</tr>
<tr>
<td>HSU, CHRISTOPHER</td>
<td>333, 334, 640, 2341, 2352, 2375</td>
</tr>
<tr>
<td>HU, JINGJING</td>
<td>1790</td>
</tr>
<tr>
<td>HU, JOHN</td>
<td>451</td>
</tr>
<tr>
<td>HUA, MENG</td>
<td>620</td>
</tr>
<tr>
<td>HUA, NATHAN</td>
<td>77</td>
</tr>
<tr>
<td>HUANG, ALEX</td>
<td>300</td>
</tr>
<tr>
<td>HUANG, BRADY</td>
<td>318, 674, 675</td>
</tr>
<tr>
<td>HUANG, CHARLIE</td>
<td>37</td>
</tr>
<tr>
<td>HUANG, DANIEL</td>
<td>451</td>
</tr>
<tr>
<td>HUANG, JANET</td>
<td>35</td>
</tr>
<tr>
<td>HUANG, MARIA</td>
<td>2112</td>
</tr>
<tr>
<td>HUANG, MARK</td>
<td>142, 145</td>
</tr>
<tr>
<td>HUANG, PETER</td>
<td>2335</td>
</tr>
<tr>
<td>HUANG, STEPHANIE</td>
<td>102, 190, 577</td>
</tr>
<tr>
<td>HUBLEY, PAUL</td>
<td>1026</td>
</tr>
<tr>
<td>HUDSON, BONNIE</td>
<td>639</td>
</tr>
<tr>
<td>HUDSON, HENRY.172, 188, 300, 334, 535, 640, 1839, 1840, 2346, 2352, 2362, 2375, 2387, 2404</td>
<td></td>
</tr>
<tr>
<td>HUDSON, JESSICA</td>
<td>324, 694</td>
</tr>
<tr>
<td>HUEGE, STEVEN</td>
<td>2277</td>
</tr>
<tr>
<td>HUERTA, CARMEN..207, 496, 497, 724</td>
<td></td>
</tr>
<tr>
<td>HUGHES, CHARLOTTE</td>
<td>305, 648</td>
</tr>
<tr>
<td>HUGHES, ELISA</td>
<td>125</td>
</tr>
<tr>
<td>HUGHES, HEATHER</td>
<td>33</td>
</tr>
<tr>
<td>HUGHES, LARRY</td>
<td>33</td>
</tr>
<tr>
<td>HUGHES, TUDOR</td>
<td>675</td>
</tr>
<tr>
<td>HUI, KIM</td>
<td>637</td>
</tr>
<tr>
<td>HUISA-GARATE, BRANKO</td>
<td>123, 124, 711</td>
</tr>
<tr>
<td>HULL, ANDREW</td>
<td>1655, 1754</td>
</tr>
<tr>
<td>HUMPHRIES, CORINNE</td>
<td>250</td>
</tr>
<tr>
<td>HUNG, JANICE</td>
<td>2375, 2388</td>
</tr>
<tr>
<td>HUNG, JENNIFER</td>
<td>248</td>
</tr>
<tr>
<td>HUNG, LYNNE</td>
<td>445, 453</td>
</tr>
<tr>
<td>HUNSAKER, NALANI</td>
<td>225, 438</td>
</tr>
<tr>
<td>HUNTER, TYRILLE</td>
<td>33</td>
</tr>
<tr>
<td>HUNTER, JACOB.309, 655, 1796, 1797, 2123, 2124</td>
<td></td>
</tr>
<tr>
<td>HUNTER, MICHAEL</td>
<td>269</td>
</tr>
<tr>
<td>HUNTER, WENDY</td>
<td>1169, 2083</td>
</tr>
<tr>
<td>HUO, KEUN-HENG</td>
<td>483, 706</td>
</tr>
<tr>
<td>HUOTT, PATRICK</td>
<td>732</td>
</tr>
<tr>
<td>HURD, MELISSA</td>
<td>88</td>
</tr>
<tr>
<td>HURST, MICHAEL</td>
<td>715, 1549</td>
</tr>
<tr>
<td>HURWITZ, MICHAEL</td>
<td>266</td>
</tr>
<tr>
<td>HUSAIN, ASGHAR</td>
<td>232</td>
</tr>
<tr>
<td>HUSEBY, DAVID</td>
<td>44</td>
</tr>
<tr>
<td>HUSKEY, DANA</td>
<td>188</td>
</tr>
<tr>
<td>HUSSAIN, ABID</td>
<td>34</td>
</tr>
<tr>
<td>HUSSAIN, SHAHID</td>
<td>632, 633, 634</td>
</tr>
<tr>
<td>HUSSEMAN, JACOB.305, 648, 1781, 2060</td>
<td></td>
</tr>
<tr>
<td>HUSTAN, LARA</td>
<td>2363, 2404</td>
</tr>
<tr>
<td>HUSTED, JOHN</td>
<td>771</td>
</tr>
<tr>
<td>HUYNH, ANDREW</td>
<td>77</td>
</tr>
<tr>
<td>HUYNH, ANTHONY</td>
<td>382</td>
</tr>
<tr>
<td>HUYNH, CHI</td>
<td>2404</td>
</tr>
<tr>
<td>HUYNH, DOQUYEN</td>
<td>683</td>
</tr>
<tr>
<td>HUYNH, JUDY</td>
<td>41</td>
</tr>
<tr>
<td>HUYNH, LOAN</td>
<td>2404</td>
</tr>
<tr>
<td>HUYNH, PAUL.641, 2045, 2046, 2404, 2405</td>
<td></td>
</tr>
<tr>
<td>HWANG, BRIAN</td>
<td>400</td>
</tr>
<tr>
<td>HWANG, CAROLINE</td>
<td>244</td>
</tr>
<tr>
<td>HWANG, DONNA</td>
<td>462</td>
</tr>
<tr>
<td>HWANG, JOHN</td>
<td>376, 551</td>
</tr>
<tr>
<td>HYLTON, DIANA.1708, 1849, 1919, 2252</td>
<td></td>
</tr>
<tr>
<td>HYUN, SUZANNE</td>
<td>204, 430, 721</td>
</tr>
<tr>
<td>IBANEZ, BERENICE</td>
<td>2210, 2322</td>
</tr>
<tr>
<td>IBARRA, MARTHA.1015, 1518, 1940, 2204</td>
<td></td>
</tr>
<tr>
<td>IBRAHIM, MAGED</td>
<td>1157</td>
</tr>
<tr>
<td>IERARDI, STEPHEN.</td>
<td>41</td>
</tr>
<tr>
<td>IGABE, PEDRA</td>
<td>555</td>
</tr>
<tr>
<td>ILCHENA, ALESSANDRA</td>
<td>1293</td>
</tr>
<tr>
<td>IM, TAE WOONG</td>
<td>85</td>
</tr>
<tr>
<td>IMAM, ASIF</td>
<td>493</td>
</tr>
<tr>
<td>IMAM, SYED</td>
<td>2203, 2320</td>
</tr>
<tr>
<td>IMPERIAL BEACH HEALTH CENTER</td>
<td>842, 843</td>
</tr>
<tr>
<td>INDRA, SEAN</td>
<td>1861, 2084</td>
</tr>
<tr>
<td>INGULLI, ELIZABETH</td>
<td>2104</td>
</tr>
<tr>
<td>INLAND URGENT CARE A MED CORP</td>
<td>14</td>
</tr>
<tr>
<td>INLAND URGENT CARE OF SUN CITY</td>
<td>14</td>
</tr>
<tr>
<td>INOCELDA, ANDREW</td>
<td>102, 103, 1603</td>
</tr>
<tr>
<td>INSTONE, SUSAN.603, 1261, 1262, 1940</td>
<td></td>
</tr>
<tr>
<td>IRAGUIMADOZ, VINCENTE</td>
<td>1759, 2027</td>
</tr>
<tr>
<td>IRIZARRY, NICOLE</td>
<td>1472</td>
</tr>
<tr>
<td>ISAIAIS, AGNELA</td>
<td>1060, 1061</td>
</tr>
<tr>
<td>ISHAK, SALAM</td>
<td>219, 721</td>
</tr>
<tr>
<td>ISHIMINE, PAUL</td>
<td>2084</td>
</tr>
<tr>
<td>ISHO, MATHEW</td>
<td>685</td>
</tr>
<tr>
<td>ISSA, REDA</td>
<td>436, 733</td>
</tr>
<tr>
<td>ITURBE-LESIA, IGNACIO</td>
<td>117, 1614</td>
</tr>
<tr>
<td>IVANOV, MARGARET</td>
<td>1747</td>
</tr>
<tr>
<td>IYENGAR, RADHA</td>
<td>1010, 1011</td>
</tr>
<tr>
<td>IYENGAR, RAVI</td>
<td>288, 617, 618</td>
</tr>
<tr>
<td>IYER, LAXMI</td>
<td>91</td>
</tr>
<tr>
<td>IYER, VICTORIA</td>
<td>1719</td>
</tr>
</tbody>
</table>
E. 服務提供者索引

JACKSON, CODY.................................639, 659
JACKSON, DANA..........................1119, 1120, 1191
JACKSON, MADELEINE......................2181
JACKSON, ROBERT..........................400
JACKSON, TAYLOR............................2084
JACOB HEALTH CARE CENTER LLC.
.........................................................781, 2249
JACOBS, JEFFREY.........................221, 376, 587
JACOBS, KATHLEEN.......................318, 675
JACOBS, NATALIA............................433, 728
JACOBS, RANDOLPH.........................432, 725
JACOBS, ROBERT............................567
JACOBS-KLEISLI, MILAGROS..............1061
JACOBSEN, BRADLEY, 565, 641, 1895, 2046
JACOBSEN, GARTH, 177, 686, 1668, 1821, 2172, 2173
JACOBSON, ARTHUR.................221, 721, 733
JACOBSON, JON..........................318, 675
JACOBY, RICHARD.........................163, 171
JAFFE, GILAD.........................294, 627, 766
JAFFRAY, JULIE..............................2102
JAFFRAY, PAUL.........................318, 675, 1811, 2149
JAHANPANAH, FERESHTEH.........26, 27
JAIME, CINDY.................................637
JAIN, ALEXANDRA.........................139, 1636
JAIN, RINA.................................690
JAIN, SUPRABHA..............................118, 626
JAKKULA, JAGAN............................227, 428, 737, 738, 769
JAKOBSEN, MICHAEL.....................384, 464
JALALI, FARID...............................361
JALISI, NEJAT.................................24
JAMAL, MOHAMMAD.......................426
JAMES, CHRISTINE.....................717, 1917
JAMES, JOJI......................................252, 369
JAMISON, KAREN..............................1363, 1364
JAMSHIDI-NEZHAD, MOHAMMAD.
..........................................................571
JANISZEWSKI, EVA..........................52
JANKOWSKI, PAWEL.......................253, 267
JANNESARI, ROYA........................1671
JANSEN, CORNELIUS......................305, 648
JARDON, JAVIER.........................1114, 1115
JASKI, BRIAN.................................105, 592
JASSO-RAMIREZ, MARTHA.....533, 629
JAVAHERI, MANIJEH......................44
JAVIER DESLOGES, JUAN.................343
JAZBEH, SAMMER.....................1811, 2149, 2150
JECMENICA, MLADEN....................426, 427
JEDAMSKI, WALDTRAUT..................204, 722
JEFFREY, JAMES..............................149
JENKIN, FREDERICK.......................68
JENKINS, ENCHANTA......................637, 1561
JENKINS, ERIN.........................283, 603
JENNINGS, AMY..............................715, 2322
JENS, ADRIENNE.......................603, 604, 1075, 1076
JENSEN, BRIAN..............................1907, 2287
JENSEN, BROOKE.........................220
JENSEN, NATISHA.........................266
JEONG, MATTHEW............................1364
JEPPESSEN, LANCE..........................709
JERECINOVICH, IGOR......................523
JESPersen, RHonda.......................107
JI, AMANDA......................................1591
JIANG, FEN......................................452, 453
JIANG, JUN.................................626, 1998
JIANG, WEN.................................1682, 1857, 2061
JILLANI, ASIF.................................235
JIMENEZ BACARDI, ADRIA...............2112
JIMENEZ, ANDREA.......................1636, 1704, 1878
JIMENEZ, CARLOS................................129
JIMENEZ, KRYSTAL..........................19, 1026
JIMENEZ, NANCY..............................715, 2323
JIN, MAN.................................300, 641, 1768, 1769, 2046
JINDAL, ANUJA...............................1658, 1677, 1854, 1894, 2113
JINDAL, RISHI...............................687
JOH, ALAN.................................119, 157, 628, 710
JOHN, TANNER...............................68, 661, 1981
JOHNSEN, HEGE.........................230, 744, 774
JOHNSON, ARIKA...........................666, 667
JOHNSON, BRYCE..............................269, 415
JOHNSON, CHRISTINE....................1910
JOHNSON, CHRISTOPHER.................2385, 2423
JOHNSON, DANIEL..........................1167, 1168
JOHNSON, JENNIFER.......................2210, 2323
JOHNSON, KENNADY.......................682, 2160
JOHNSON, KENNETH.......................117, 1614
JOHNSON, KIMBERLY......................111, 153, 208
JOHNSON, ROGER.........................200, 221, 510
JOHNSON, SHAWNA AKIKO.................1262, 1263
JOHNSON, SUSAN............................371, 586
JOHNSON, TAYLOR.........................2084
JOHNSON, WILLIAM.........................173, 760
JOHNSON, RACHEL.........................286, 610
JOLLEY, WALTER...........................659
JOMOC, CAITLIN..............................302, 645, 1772, 2052
JONES, CHRISTA......................283, 604, 1719, 1941
JONES, DANIEL..............................294, 316
JONES, KENDRA.............................507
JONES, LAILA.....................................283
JONES, LAKESHA..............................209
JONES, MARILYN..............................290, 622
JONES, STACY.....................................753
JONES, VALORIA.......................217, 729, 766
JOO, KATHY.........................................726
JORDAN, JAMIE..............................1431
JORJADZE, KETEVAN......................283
JOSEPH, JEFFREY.........................221, 510, 733
JOSHI, WEENA.................................1686, 1841, 1902, 2084, 2085
JOSHI, YASH.................................311, 661, 2303
JOSHUA, JISHA...............................1808, 2140
JOSON, PETER.................................376, 461, 587, 588
JOU, BILL..........................................726
JOU, PAUL..........................................574
JOURDAIN, VICTOR..........................113
JOYCE, ROBERT...............................2425
JU, NATHANIEL...............................420, 559, 755, 1596, 1889, 2222
JUANG, PATRICIA.........................1738, 1977
JUAREZ, AMERICA............................2260
JUAREZ, LETICIA.........................1125, 1126, 1462
JUAREZ, PATRICIA............................1432
JULAZADEH, SARA..........................190, 302, 645
JULIAN, FIDES........163, 281, 599, 1652, 1712, 1713, 1926, 1927
JUMA, SAAD...............................145, 148, 325, 344, 696
JURKOWSKI, LEONARD.....................617
JUSTINO, HENRI..............................2073

K
KAABI, BILAL....................................420
KABOLIZADEH, PEYMAN....................393
KABRA, ASHISH...............................556, 757
KADAKIA, AMAR..............................241
<table>
<thead>
<tr>
<th>Name</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>KADAKIA, NIMISH</td>
<td>269, 270, 415</td>
</tr>
<tr>
<td>KADIFA, FADY</td>
<td>364, 391</td>
</tr>
<tr>
<td>KAFRI, HASSAN</td>
<td>108, 119, 152, 157, 1103</td>
</tr>
<tr>
<td>KAH, NICHOLAS</td>
<td>604, 1001, 1138</td>
</tr>
<tr>
<td>KAISER, EMILY</td>
<td>762</td>
</tr>
<tr>
<td>KAISEY, MUSHRIK</td>
<td>22</td>
</tr>
<tr>
<td>KAKAIT, ROSHNI</td>
<td>56, 1042</td>
</tr>
<tr>
<td>KAKIMOTO, AMY</td>
<td>28</td>
</tr>
<tr>
<td>KALANTARI, OZHAN</td>
<td>258</td>
</tr>
<tr>
<td>KALBAKJI, NATALY</td>
<td>2331, 2346, 2352, 2363, 2376, 2388, 2405</td>
</tr>
<tr>
<td>KALE, RAHUL</td>
<td>701, 702, 704</td>
</tr>
<tr>
<td>KALINIAN, HAYGOUTH</td>
<td>700, 703</td>
</tr>
<tr>
<td>KALRA, ANKUR</td>
<td>2335, 2388, 2423</td>
</tr>
<tr>
<td>KAMADA, SATOSHI</td>
<td>37</td>
</tr>
<tr>
<td>KAMAREI, SHAPARAK</td>
<td>64</td>
</tr>
<tr>
<td>KAMEL, JOSEPH</td>
<td>542</td>
</tr>
<tr>
<td>KAMOTO, LYNN</td>
<td>1574</td>
</tr>
<tr>
<td>KANAN, SAMER</td>
<td>272, 273, 402</td>
</tr>
<tr>
<td>KANALY, KIM</td>
<td>451, 458</td>
</tr>
<tr>
<td>KANE, KARA</td>
<td>553, 581</td>
</tr>
<tr>
<td>KANE, NORMAN</td>
<td>323, 571</td>
</tr>
<tr>
<td>KANG, EILEEN</td>
<td>264, 429</td>
</tr>
<tr>
<td>KANG, JOSEPH</td>
<td>770</td>
</tr>
<tr>
<td>KANG, KYUNG</td>
<td>240</td>
</tr>
<tr>
<td>KANNAN, SWATI</td>
<td>1967</td>
</tr>
<tr>
<td>KANSAGRA, AKASH</td>
<td>675</td>
</tr>
<tr>
<td>KANSA, DEVANSHU</td>
<td>690</td>
</tr>
<tr>
<td>KANTAS, PARIS.111, 714, 1518, 1609</td>
<td></td>
</tr>
<tr>
<td>KANU, ABDUL</td>
<td>205, 722</td>
</tr>
<tr>
<td>KANUKUNTULA, TULASI.428, 429, 738, 769</td>
<td></td>
</tr>
<tr>
<td>KARANDE, PRAChI.139, 233, 539, 1637, 1704, 1878</td>
<td></td>
</tr>
<tr>
<td>KARANIKKIS, CHRISTOS</td>
<td>759</td>
</tr>
<tr>
<td>KARANJIA, NAVAZ.296, 311, 634, 661</td>
<td></td>
</tr>
<tr>
<td>KARPETIAN, ELENA</td>
<td>2352</td>
</tr>
<tr>
<td>KARAVAN JAHROMI, MAHSA</td>
<td>542</td>
</tr>
<tr>
<td>KARI, ELINA.305, 648, 649, 1781, 1782, 1857, 1858, 2061</td>
<td></td>
</tr>
<tr>
<td>KARMABADI, MARJAN</td>
<td>63</td>
</tr>
<tr>
<td>KARIMI, KAMBIZ</td>
<td>241</td>
</tr>
<tr>
<td>KARIMIAN, AMIR</td>
<td>280</td>
</tr>
<tr>
<td>KARIPPOT, ANOOP.135, 136, 311, 313, 314, 662, 665, 666</td>
<td></td>
</tr>
<tr>
<td>KARMARKAR, KANKA.651, 1432, 2113</td>
<td></td>
</tr>
<tr>
<td>KARMUR, AMIT.231, 745, 774, 775, 776</td>
<td></td>
</tr>
<tr>
<td>KAROYD, ATULA</td>
<td>440, 518</td>
</tr>
<tr>
<td>KAROW, DAVID</td>
<td>318, 675</td>
</tr>
<tr>
<td>KARP, MICHAEL</td>
<td>1599</td>
</tr>
<tr>
<td>KARRIS, BIANCA</td>
<td>662</td>
</tr>
<tr>
<td>KARROWN, WASFEE</td>
<td>365</td>
</tr>
<tr>
<td>KARUNAMUN, JENNIFER</td>
<td>318, 675</td>
</tr>
<tr>
<td>KASAI, SARAH</td>
<td>761, 2395</td>
</tr>
<tr>
<td>KASAWA, JOHN</td>
<td>24, 1088, 1089</td>
</tr>
<tr>
<td>KASIR, RAPHID</td>
<td>690</td>
</tr>
<tr>
<td>KASSAB, GHADA</td>
<td>155, 614</td>
</tr>
<tr>
<td>KASSAM, HAFIZ</td>
<td>270</td>
</tr>
<tr>
<td>KATSNELSON, MARCELLA</td>
<td>292, 626</td>
</tr>
<tr>
<td>KATZ, JONATHAN</td>
<td>325, 696, 1830, 2189</td>
</tr>
<tr>
<td>KATZ, YISRAEL</td>
<td>1747, 1998</td>
</tr>
<tr>
<td>KATZMAN, SETH</td>
<td>130, 339, 652</td>
</tr>
<tr>
<td>KATZMAN, BARRY.334, 2331, 2341, 2376, 2388, 2405, 2406</td>
<td></td>
</tr>
<tr>
<td>KATZMAN, LEE</td>
<td>2338, 2376</td>
</tr>
<tr>
<td>KAUFER, DAVID</td>
<td>1549, 1550</td>
</tr>
<tr>
<td>KAUFHOLD, ANNE</td>
<td>68, 1004, 1316, 1317, 1529, 1530</td>
</tr>
<tr>
<td>KAUFMAN, AVRUM</td>
<td>346</td>
</tr>
<tr>
<td>KAUFMAN, BRITNEY</td>
<td>513, 553</td>
</tr>
<tr>
<td>KAUFMAN, DAVID</td>
<td>244</td>
</tr>
<tr>
<td>KAUFMAN, JENNIFER</td>
<td>1317</td>
</tr>
<tr>
<td>KAUFMAN, TIFFANY</td>
<td>513</td>
</tr>
<tr>
<td>KAUNITZ, GENIEVIE</td>
<td>614, 1967</td>
</tr>
<tr>
<td>KAUP, ALLISON.104, 287, 314, 573, 578</td>
<td></td>
</tr>
<tr>
<td>Kaur, JATINDER.29, 62, 1143, 1244, 1245</td>
<td></td>
</tr>
<tr>
<td>KAURA, MAYA</td>
<td>44</td>
</tr>
<tr>
<td>KAYAL, ANAS</td>
<td>121, 711</td>
</tr>
<tr>
<td>KAYE, ALYSON</td>
<td>753</td>
</tr>
<tr>
<td>KAYE, SHAWN</td>
<td>16</td>
</tr>
<tr>
<td>KAYE, WALTER</td>
<td>2303</td>
</tr>
<tr>
<td>KAZEM, AHMAD</td>
<td>1294</td>
</tr>
<tr>
<td>KAZEM, HARON</td>
<td>1020</td>
</tr>
<tr>
<td>KAZEMI, SEPIDEH</td>
<td>250</td>
</tr>
<tr>
<td>KEALEY, TAMMY</td>
<td>554</td>
</tr>
<tr>
<td>KEARS, MARK</td>
<td>1829</td>
</tr>
<tr>
<td>KEARNY MESA CONVALESCENT AND NURSING HOME</td>
<td>781</td>
</tr>
<tr>
<td>KEARSE, WILFRED</td>
<td>344</td>
</tr>
<tr>
<td>KEDDINGTON, JOAN.2335, 2389, 2424</td>
<td></td>
</tr>
<tr>
<td>KEEFE, KELLY</td>
<td>641</td>
</tr>
<tr>
<td>KEEL, DOUGLAS</td>
<td>614</td>
</tr>
<tr>
<td>KEEN, WILLIAM</td>
<td>280, 1711</td>
</tr>
<tr>
<td>KEFLEZIGHI, BAHGHI</td>
<td>1317, 1318</td>
</tr>
<tr>
<td>KEIFER, JASON</td>
<td>662</td>
</tr>
<tr>
<td>KEIL, DANNY.145, 148, 179, 325, 344, 696</td>
<td></td>
</tr>
<tr>
<td>KEIL, BENJAMIN</td>
<td>2184</td>
</tr>
<tr>
<td>KELLY, CHARLES</td>
<td>377, 588</td>
</tr>
<tr>
<td>KELLY, YESENEIA</td>
<td>111</td>
</tr>
<tr>
<td>KELLEY, JESSICA</td>
<td>604</td>
</tr>
<tr>
<td>KELLEY, STEVEN</td>
<td>747, 748</td>
</tr>
<tr>
<td>KELLING, JONATHAN</td>
<td>493</td>
</tr>
<tr>
<td>KELLOGG, CHERYL</td>
<td>46</td>
</tr>
<tr>
<td>KELLOGG, KRISTEN</td>
<td>1076</td>
</tr>
<tr>
<td>KELLY, KATHERINE</td>
<td>558, 1485, 1486, 1889</td>
</tr>
<tr>
<td>KEMMERLY, THOMAS</td>
<td>727</td>
</tr>
<tr>
<td>KEMP, KATHRINE</td>
<td>1263, 1941</td>
</tr>
<tr>
<td>KENNEDY, KATHRYN</td>
<td>469</td>
</tr>
<tr>
<td>KERAMATI, SHAHIN</td>
<td>597</td>
</tr>
<tr>
<td>KERSTEN, DIANA</td>
<td>377, 588</td>
</tr>
<tr>
<td>KESANAPALLI, DEEPTHI</td>
<td>1432</td>
</tr>
<tr>
<td>KESARI, SANTOSH</td>
<td>455</td>
</tr>
<tr>
<td>KESEL, KELSEY</td>
<td>440, 518</td>
</tr>
<tr>
<td>KESHLAVARI, SARA</td>
<td>1671</td>
</tr>
<tr>
<td>KESSLER, JENNIFER</td>
<td>754</td>
</tr>
<tr>
<td>KEYS, ANNA</td>
<td>182</td>
</tr>
<tr>
<td>KFIR, MENASHE</td>
<td>251, 252, 368</td>
</tr>
<tr>
<td>KHAFAZA, MOHAMD</td>
<td>2277, 2303</td>
</tr>
<tr>
<td>KHAGI, SIMON</td>
<td>252</td>
</tr>
<tr>
<td>KHAING, KATHY</td>
<td>121, 633</td>
</tr>
<tr>
<td>KHALEE, AMMAR</td>
<td>94, 2259</td>
</tr>
<tr>
<td>KHALEFGHA DAMAVANDI, MIR BEHNM</td>
<td>393, 394</td>
</tr>
<tr>
<td>KHAILF, MANI</td>
<td>339, 655</td>
</tr>
<tr>
<td>KHAIHITI, PAYMAN</td>
<td>2406</td>
</tr>
<tr>
<td>KHALIL, VADY.160, 190, 337, 645, 2331, 2341, 2347, 2353, 2363, 2376, 2377, 2389, 2406</td>
<td></td>
</tr>
<tr>
<td>KHAMASA, SORAYA</td>
<td>629, 2303</td>
</tr>
<tr>
<td>KHAMISHON, BORSI</td>
<td>634, 635, 2027</td>
</tr>
<tr>
<td>KHAN, AHAD</td>
<td>201</td>
</tr>
<tr>
<td>KHAN, ALIYA</td>
<td>637, 1108, 1109</td>
</tr>
<tr>
<td>KHAN, CEMONE</td>
<td>462</td>
</tr>
</tbody>
</table>

2474
<table>
<thead>
<tr>
<th>Name</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>KOUMJIAN, MICHAEL</td>
<td>343, 524</td>
</tr>
<tr>
<td>KOUPAIE, JAFAR</td>
<td>498</td>
</tr>
<tr>
<td>KOUSARI, JHALEH</td>
<td>1482, 1483</td>
</tr>
<tr>
<td>KOVACS, DAVID</td>
<td>453, 476</td>
</tr>
<tr>
<td>KOZMA, BONITA</td>
<td>1967</td>
</tr>
<tr>
<td>KRAD, OMAR</td>
<td>461, 462</td>
</tr>
<tr>
<td>KRAFCK, SONJA</td>
<td>46</td>
</tr>
<tr>
<td>KRAFT, ELIZABETH</td>
<td>266</td>
</tr>
<tr>
<td>KRAHN, DOUGLAS</td>
<td>520</td>
</tr>
<tr>
<td>KRAK, MICHAEL</td>
<td>1600</td>
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<tr>
<td>KRAMER, MELISSA</td>
<td>1240</td>
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<td>KRAPES, MICHAEL</td>
<td>1907, 2287</td>
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<tr>
<td>KRAUSE, MARTIN</td>
<td>278, 493, 594, 765, 1850, 2232</td>
</tr>
<tr>
<td>KREMER, ARNOLD</td>
<td>16, 24</td>
</tr>
<tr>
<td>KREPS, CHRISTOPHER</td>
<td>174, 311</td>
</tr>
<tr>
<td>KRESHAK, ALLYSON</td>
<td>1732</td>
</tr>
<tr>
<td>KRIGER, STEPHEN</td>
<td>133, 340, 538</td>
</tr>
<tr>
<td>KRIGER, LISA</td>
<td>1364</td>
</tr>
<tr>
<td>KRISHNAN, PRIYANKA</td>
<td>359, 425</td>
</tr>
<tr>
<td>KROCHMAL, RACHEL</td>
<td>708</td>
</tr>
<tr>
<td>KROL, THOMAS</td>
<td>562</td>
</tr>
<tr>
<td>KRUJEGER, VAN</td>
<td>691</td>
</tr>
<tr>
<td>KRUJ, PETER</td>
<td>651</td>
</tr>
<tr>
<td>KRYCHMAN, MICHAEL</td>
<td>371</td>
</tr>
<tr>
<td>KUECHEL, RALPH</td>
<td>473</td>
</tr>
<tr>
<td>KUEK, JOHN</td>
<td>533, 630</td>
</tr>
<tr>
<td>KUGEL, SAMUEL</td>
<td>539, 2283</td>
</tr>
<tr>
<td>KUJOKA, TROY</td>
<td>1128</td>
</tr>
<tr>
<td>KULASA, KRISTEN</td>
<td>1758, 1977</td>
</tr>
<tr>
<td>KULHANEK, JAN</td>
<td>163, 280</td>
</tr>
<tr>
<td>KULICK, DANIEL</td>
<td>445</td>
</tr>
<tr>
<td>KULISCHAK, JOHN</td>
<td>2364, 2407</td>
</tr>
<tr>
<td>KULJIAN, NANCY</td>
<td>497</td>
</tr>
<tr>
<td>KULKARNI, NISHAT</td>
<td>2267, 2292</td>
</tr>
<tr>
<td>KUMAR, AVNEE</td>
<td>516, 770, 1867, 2233</td>
</tr>
<tr>
<td>KUMAR, KRIS</td>
<td>280</td>
</tr>
<tr>
<td>KUMAR, NINA</td>
<td>209</td>
</tr>
<tr>
<td>KUMAR, NISHCHAL</td>
<td>51</td>
</tr>
<tr>
<td>KUMAR, RASHMI</td>
<td>244</td>
</tr>
<tr>
<td>KUMAR, SOMA</td>
<td>1986</td>
</tr>
<tr>
<td>KUNAM, SYAM</td>
<td>227, 769</td>
</tr>
<tr>
<td>KUNIN–RIDA, TERI</td>
<td>24, 56, 68, 69</td>
</tr>
<tr>
<td>KUO, ALLEN</td>
<td>583, 585</td>
</tr>
<tr>
<td>KUO, DENNIS</td>
<td>351, 352, 387, 2102</td>
</tr>
<tr>
<td>KUPFER, DAVID</td>
<td>521, 524, 694</td>
</tr>
<tr>
<td>KUPIS, ROBERT</td>
<td>762</td>
</tr>
<tr>
<td>KUPPALLI, KRUTIKA</td>
<td>291, 625, 1745, 1993</td>
</tr>
<tr>
<td>KURASHI, AQDAS</td>
<td>85</td>
</tr>
<tr>
<td>KURESHI, SOHAIB</td>
<td>342, 635</td>
</tr>
<tr>
<td>KURKJIAN, AZAD</td>
<td>703</td>
</tr>
<tr>
<td>KUROSAKA, MOMO</td>
<td>619, 1982</td>
</tr>
<tr>
<td>KURTULUS, MEL</td>
<td>298</td>
</tr>
<tr>
<td>KURUKULASURIYA, DAYANTHITHI</td>
<td>60</td>
</tr>
<tr>
<td>KURUVADI, NISHA</td>
<td>59, 77, 78</td>
</tr>
<tr>
<td>KURZ, TROY</td>
<td>161, 2260</td>
</tr>
<tr>
<td>KUSHNARYOV, ANTON</td>
<td>567, 762</td>
</tr>
<tr>
<td>KUSNEZOV, NICHOLAS</td>
<td>144, 148, 323, 691, 1642, 1827, 2182</td>
</tr>
<tr>
<td>KVALTLOKOVSKY, MILLA</td>
<td>1748, 1999</td>
</tr>
<tr>
<td>KYI, MYA</td>
<td>528, 604</td>
</tr>
<tr>
<td>LA COSTA HOUSE</td>
<td>2239</td>
</tr>
<tr>
<td>LA FUENTE POST ACUTE</td>
<td>782, 2252</td>
</tr>
<tr>
<td>LA JOLLA NURSING AND REHAB CTR</td>
<td>779, 2244</td>
</tr>
<tr>
<td>LA MAESTA CHC EL CAJON BROADWAY</td>
<td>811, 812, 825</td>
</tr>
<tr>
<td>LA MAESTA CHC EL CAJON BROADWAY</td>
<td>26, 1093</td>
</tr>
<tr>
<td>LA MAESTA FAMILY CLINIC INC.</td>
<td>806, 807, 824, 826, 854, 855, 861, 892, 893, 894, 895, 954</td>
</tr>
<tr>
<td>LA MAESTA FAMILY CLINIC INC.,</td>
<td>26, 57, 72, 1093, 1209, 1210, 1345</td>
</tr>
<tr>
<td>LA MESA HEALTHCARE CTR.779, 2245</td>
<td></td>
</tr>
<tr>
<td>LA MESA PEDIATRICS</td>
<td>843, 844</td>
</tr>
<tr>
<td>LA MESA PEDIATRICS</td>
<td>40, 1171, 1172</td>
</tr>
<tr>
<td>LA PALOMA HEALTHCARE CTR.780, 2246</td>
<td></td>
</tr>
<tr>
<td>LABIB, MICHAEL</td>
<td>2135, 2304</td>
</tr>
<tr>
<td>LAC, PETER</td>
<td>433, 434, 767</td>
</tr>
<tr>
<td>LACH, REBECCA</td>
<td>1026, 1027, 1318, 1319</td>
</tr>
<tr>
<td>LACH, NIKISHA</td>
<td>715</td>
</tr>
<tr>
<td>LAFONTANT, JEAN</td>
<td>62, 572, 573</td>
</tr>
<tr>
<td>LAFORTEZA, JOZELLE</td>
<td>1942</td>
</tr>
<tr>
<td>LAGO HERNANDEZ, CARLOS</td>
<td>1748, 1999</td>
</tr>
<tr>
<td>LAGUNA HILLS HEALTH AND REHAB CTR.</td>
<td>780</td>
</tr>
<tr>
<td>LAI, AMARA</td>
<td>1144</td>
</tr>
<tr>
<td>LAI, KHANG</td>
<td>261</td>
</tr>
<tr>
<td>LAIDLAW, JOHN</td>
<td>630, 2304</td>
</tr>
<tr>
<td>LAJOIE, ADRIANNE</td>
<td>168, 289</td>
</tr>
<tr>
<td>LAKE FOREST NURSING CENTER.</td>
<td>780</td>
</tr>
<tr>
<td>LAKE, MENORE</td>
<td>676</td>
</tr>
<tr>
<td>LAKHERA, YOGITA</td>
<td>171, 172, 295</td>
</tr>
<tr>
<td>LALITHAKUMARI, ARYA</td>
<td>1365</td>
</tr>
<tr>
<td>LALONDE, FRANCOIS</td>
<td>467, 483</td>
</tr>
<tr>
<td>LAM, ANNE</td>
<td>2365, 2408</td>
</tr>
<tr>
<td>LAM, DAVINA</td>
<td>2124</td>
</tr>
<tr>
<td>LAM, KHANH</td>
<td>599, 1606, 1927</td>
</tr>
<tr>
<td>LAM, KIM</td>
<td>371, 372</td>
</tr>
<tr>
<td>LAM, MICHAEL</td>
<td>1749, 1999</td>
</tr>
<tr>
<td>LAM, PAMELA</td>
<td>292</td>
</tr>
<tr>
<td>LAM, TUAN</td>
<td>402</td>
</tr>
<tr>
<td>LAM, VINH</td>
<td>479, 485</td>
</tr>
<tr>
<td>LAMALE–SMITH, LEAH</td>
<td>1660, 1679, 1763, 2037</td>
</tr>
<tr>
<td>LAMANTIA, MICHIELE</td>
<td>626, 715, 1213, 1365, 1550</td>
</tr>
<tr>
<td>LAMBERT, GAGE</td>
<td>2124</td>
</tr>
<tr>
<td>LAMONT, DANIEL</td>
<td>354, 365</td>
</tr>
<tr>
<td>LANCASTER, MICHELLE</td>
<td>513</td>
</tr>
<tr>
<td>LANDO GUTIERREZ, JEREMY</td>
<td>2107</td>
</tr>
<tr>
<td>LANDER, JEFFREY</td>
<td>91, 345, 357, 358, 411, 543</td>
</tr>
<tr>
<td>LANDIS, SARAH</td>
<td>1452</td>
</tr>
<tr>
<td>Landon, JEFFREY</td>
<td>537</td>
</tr>
<tr>
<td>LANE, BRIAN</td>
<td>2015</td>
</tr>
<tr>
<td>LANE, KEVIN</td>
<td>223, 721, 735, 736</td>
</tr>
<tr>
<td>LANE, KIMBERLY</td>
<td>1609, 1642, 1653, 1719, 1832, 1942, 1943</td>
</tr>
<tr>
<td>LANE, RICHARD</td>
<td>99</td>
</tr>
<tr>
<td>LANG, PAUL</td>
<td>300, 641</td>
</tr>
<tr>
<td>LANGENBERG, BRET</td>
<td>687</td>
</tr>
<tr>
<td>LANGER, ROBERT</td>
<td>543</td>
</tr>
<tr>
<td>LANGIS, TANYA</td>
<td>570</td>
</tr>
<tr>
<td>LANIER, JAME</td>
<td>225</td>
</tr>
<tr>
<td>LANIER, TIMOTHY</td>
<td>357</td>
</tr>
<tr>
<td>LANUZA, MARK</td>
<td>1203</td>
</tr>
<tr>
<td>LAPINA, LORI</td>
<td>1452</td>
</tr>
<tr>
<td>LARA, LESLEY</td>
<td>1530</td>
</tr>
<tr>
<td>LARKINS, PHILIP</td>
<td>191, 1693</td>
</tr>
</tbody>
</table>
E. 服务提供者索引

LIAUW, JASON. ... 400, 401, 406, 479
LIEBER, CAROL. ....... 714, 1266
LIEBERMAN, RONALD. ............. 174
LIEM, WIEKE. ....... 544
LIEN, CHRISTINA. .... 520
LIFE CARE CENTER OF ESCONDIDO. ... 779, 2242
LIFE CARE CENTER OF VISTA.. 782, 2252
LIM, DEAN. ....... 554
LIM, IMELDA. 529, 1194, 1195, 1266, 1871
LIM, ROSEMARIE..... 531, 1877
LIM, VIVIAN. ....... 318, 676
LIN, CHI WHEI. ....... 44
LIN, DARIUS. ....... 270
LIN, HENRY. ....... 2409, 2410
LIN, JAMES. ....... 256
LIN, JAMES. ....... 256
LIN, JOYCE. ....... 1797
LIN, KEVIN. ....... 265
LIN, PARKSON. ....... 262
LIN, RAY. ....... 514
LIN, RICHARD. ....... 748
LIN, SHINKO. ....... 155, 530, 574
LIN, SHUANG. ....... 1089
LIN, THEODORE. ....... 436, 437, 734
LIN, TOM. ....... 2100
LIN, YUAN. ....... 198
LINDA VISTA HEALTH CARE CTR. 877, 878, 951, 952
LINDA VISTA HEALTH CARE CTR. 73, 1346
LINDBACK, SARAH. ....... 1246
LINDEMAN, KURTIS. ....... 1319, 1320
LINDEMANN, CHRISTINA. ....... 655, 2125
LINKE, SARAH. ....... 1806, 2135, 2278, 2305
LINNEMEYER-RISSER, KRISTEN. ....... 320
LIOTTA, BENJAMIN. 288, 617, 1733, 1972
LIPSCHITZ, LISA. 1048, 1109, 1187, 1188, 1397, 1398, 1399, 1587
LIPTON, GREGORY. ....... 1397, 1398, 1399, 1587
LIRA, JOSE. ....... 118, 137
LIRA, SHANNON. ....... 724
LISH, JONATHAN. ....... 1320
LIU BARBARO, DOROTHY. ....... 430, 1177
LIU, ANDREW. 118, 170, 183, 292, 329, 531, 563, 565, 626, 1894
LIU, CHIA CHI. ....... 251
LIU, CHIA-LIN. ....... 69
LIU, FRED. ....... 311
LIU, GENE FU. ....... 475
LIU, GRACE. ....... 201, 240
LIU, JESICA. ....... 1433
LIU, JIE. ....... 1320
LIU, SHANGLEI. ....... 1819, 2167
LIU, STEVEN. ....... 170
LIU, TIMOTHY. ....... 2306
LIU, WENJING. ....... 551
LIU, YUNXIAN. ....... 2047
LIZOTTE, PAUL. ....... 62
LLANES, BENJAMIN. ....... 2410
LLOYD, MATTHEW. ....... 1453, 1454
LO, ALAN. ....... 44, 364
LO, PATRICIA. ....... 372
LOBATZ, MICHAEL. ....... 99
LOBUE, THOMAS. ....... 437, 510
LOC, KIET. ....... 369
LOCASIO, ELIZABETH. ....... 507
LOCKE, JOHN. ....... 523
LOEFFLER, ALLISON. 1048, 1049, 1109, 1110, 1188, 1399, 1400, 1401, 1587, 1588
LOGAN HEIGHTS FAMILY HEALTH CENTER. 923, 924, 925, 926, 927, 928, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 953, 956
LOGAN HEIGHTS FAMILY HEALTH CENTER. ....... 73, 1346, 1347
LOGAN, DWAYNE. ....... 378
LOHINES, ELLIE. ....... 1454
LONG, RYAN. ....... 139, 162
LONGARDNER, KATHERINE. 2029, 2306
LONGBERG, AUSTIN. ....... 447
LONGOBARDO, FRANCESCA. ....... 655
LOPER, KAREN. ....... 1433
LOPEZ VIZCARRA, MARCO. ....... 455
LOPEZ, ALYSSA-NICOLE. ....... 125, 639
LOPEZ, IRMA. ....... 30
LOPEZ, JOANNA. ....... 2264
LOPEZ, MARIA. ....... 438
LOPEZ, MARIBEL. ....... 715, 2323
LOPEZ, MARIO. ....... 1454, 1455
LOPEZ, NICOLE. ....... 321, 685, 1819, 2167
LOPEZ, RACHAEL. ....... 372
LOPEZ, SANDRA. ....... 757, 760
LOPEZ, XIMENA. ....... 1865, 2114
LOSTETTER, ADRIENNE. ....... 1246
LOUIE, BRANDON. ....... 526
LOUSSARARIAN, ARTHUR. 445, 446, 453
LOVE, VICKI. ....... 1267
LOVE, YVONNE. ....... 713
LOVEJOY, AMY. 1686, 1833, 1902, 2085
LOVERN, JENNIFER. 612, 1129, 1130, 1294, 1295
LOVING CARE ADHC. ....... 2257
LOWE, ASHLEY. ....... 164, 283
LOWE, LINDSAY. ....... 629
LOZADA-PASTORIO, ELIZABETH. 121, 122
LOZANO, JUAN. ....... 19, 115, 1612
LOZANO, MARTHA. ....... 138
LOZIER, JEFFREY. ....... 576, 1913
LU, CHONG PING. ....... 228
LU, CHRISTIAN. ....... 248
LU, LESLIE. ....... 52
LU, STEPHANIE. ....... 1366
LU, TAMMY. ....... 1076, 1267
LUAN, GORDON. ....... 69
LUCACI, BIANCA. ....... 431, 724
LUCAS, SARAH. ....... 322
LUCATERO, JENNIFER. ....... 514, 553
LUCERO, RENEE. ....... 544
LUCKETT, DE COURCY. ....... 153
LUDEMA, THOMAS. ....... 92
LUGO, GUSTAVO. ....... 292
LUHAR, RIYA. ....... 99, 296, 576
LUJAN, ARLEEN. ....... 1433, 1434
LULIC, DZENAN. ....... 55
LUM HO, RACHEL. ....... 712, 2200, 2201
LUM, YUIN-WAH. ....... 1195
LUNA, MARIO. ....... 523, 748
LUND, GUY. ....... 626, 633
LUONG, TRAN. ....... 1798
LUPTON, JASON. ....... 615
LURINKS GARCIA, MARIA. ....... 729
LUSBY, FRANKLIN. ....... 2365
LUSCHWITZ, BRIAN. ....... 1600
### E. 服務提供者索引

<table>
<thead>
<tr>
<th>服務提供者索引</th>
<th>页碼</th>
</tr>
</thead>
<tbody>
<tr>
<td>LUTTGE, SCOTT</td>
<td>442, 526, 750</td>
</tr>
<tr>
<td>LUU, DANIEL</td>
<td>612, 1965</td>
</tr>
<tr>
<td>LUU, QUANG</td>
<td>259, 464</td>
</tr>
<tr>
<td>LY, NANCY</td>
<td>108, 528, 532, 597</td>
</tr>
<tr>
<td>LY, PHUONG</td>
<td>51</td>
</tr>
<tr>
<td>LY, SOPHEP</td>
<td>184</td>
</tr>
<tr>
<td>LYFORD, WILLIS</td>
<td>615</td>
</tr>
<tr>
<td>LYLE, DOUGLAS</td>
<td>355, 365</td>
</tr>
<tr>
<td>LYNCH, GREGORY</td>
<td>737</td>
</tr>
<tr>
<td>LYNCH, SHAUNA</td>
<td>619</td>
</tr>
<tr>
<td>LYNN, KENNETH</td>
<td>387</td>
</tr>
<tr>
<td>MAA CHIP, FHARAK</td>
<td>531, 533</td>
</tr>
<tr>
<td>MAASUMI, KASRA</td>
<td>369, 370, 582</td>
</tr>
<tr>
<td>MAC, OLIVIA</td>
<td>230, 744, 775</td>
</tr>
<tr>
<td>MACASADIA, MARITES</td>
<td>131, 537</td>
</tr>
<tr>
<td>MACAULEY, TODD</td>
<td>36</td>
</tr>
<tr>
<td>MACCHIO, GREGORY</td>
<td>106</td>
</tr>
<tr>
<td>MACDONALD, HEATHER</td>
<td>266</td>
</tr>
<tr>
<td>MACEWAN, IAIS</td>
<td>176, 316, 669</td>
</tr>
<tr>
<td>MACHO, DIANIELA</td>
<td>225</td>
</tr>
<tr>
<td>MACIAS, ALISSA</td>
<td>1128, 1129, 1483, 1484</td>
</tr>
<tr>
<td>MACIEL, MARLA</td>
<td>367</td>
</tr>
<tr>
<td>MACINTYRE, ELIZABETH</td>
<td>1240</td>
</tr>
<tr>
<td>MACK, GREGORY</td>
<td>691</td>
</tr>
<tr>
<td>MACKAY, GILLIAN.172, 298, 637, 1660, 1764, 2037, 2038</td>
<td></td>
</tr>
<tr>
<td>MACMURRAY, MICHAEL</td>
<td>62, 563</td>
</tr>
<tr>
<td>MADAN, SAKSHI</td>
<td>655</td>
</tr>
<tr>
<td>MADANI, BAHRAR</td>
<td>168</td>
</tr>
<tr>
<td>MADANY, GEORGE</td>
<td>1434</td>
</tr>
<tr>
<td>MADERA RIVERA, PAULA.1640, 1697, 2164, 2165</td>
<td></td>
</tr>
<tr>
<td>MADGEDI, SHEILA</td>
<td>604</td>
</tr>
<tr>
<td>MADHAV, KINJAL</td>
<td>97, 105</td>
</tr>
<tr>
<td>MADHAV, SANDIP</td>
<td>95, 102, 279, 307</td>
</tr>
<tr>
<td>MADRID, RICHARD</td>
<td>49, 85</td>
</tr>
<tr>
<td>MAFONG, ERICK</td>
<td>615</td>
</tr>
<tr>
<td>MAGANA, MARISA</td>
<td>175, 763</td>
</tr>
<tr>
<td>MAGANDA, JESSICA</td>
<td>111</td>
</tr>
<tr>
<td>MAGEE, ANNA</td>
<td>2272</td>
</tr>
<tr>
<td>MAGGE, SURES</td>
<td>480</td>
</tr>
<tr>
<td>MAGINOT–CHESHER, TAMARA.1806, 2136, 2278, 2306</td>
<td></td>
</tr>
<tr>
<td>MAGIT, ANTHONY.305, 649, 1782, 1783, 2062, 2063</td>
<td></td>
</tr>
<tr>
<td>MAGNOLIA ADULT DAY HEALTH CARE</td>
<td>2256</td>
</tr>
<tr>
<td>MAGNOLIA POST ACUTE CARE.778, 2240</td>
<td></td>
</tr>
<tr>
<td>MAGNOLIA SPECIAL CARE CENTER.</td>
<td>778</td>
</tr>
<tr>
<td>MAGOS, DANIEL</td>
<td>184, 2268</td>
</tr>
<tr>
<td>MAHADAD, MEHRBAD</td>
<td>253</td>
</tr>
<tr>
<td>MAHDAI, SUZAN</td>
<td>1183</td>
</tr>
<tr>
<td>MAHANDRAN, SRIVIDYA</td>
<td>1434</td>
</tr>
<tr>
<td>MAHESHWARI, ANOOP</td>
<td>420, 422</td>
</tr>
<tr>
<td>MAHMOOD, FARAH</td>
<td>203</td>
</tr>
<tr>
<td>MAHONEY, KAITLYN</td>
<td>1472</td>
</tr>
<tr>
<td>MAHOOTI, SEPI</td>
<td>650</td>
</tr>
<tr>
<td>MAHROU, REZA</td>
<td>235</td>
</tr>
<tr>
<td>MAI, TUAN</td>
<td>147, 595, 597</td>
</tr>
<tr>
<td>MAJDAHANI, KAREN</td>
<td>251</td>
</tr>
<tr>
<td>MAJEED, WASAN</td>
<td>85</td>
</tr>
<tr>
<td>MAJERSKI GONZALEZ, MANDY.716, 1562</td>
<td></td>
</tr>
<tr>
<td>MAJITHA, AMIT</td>
<td>1749, 2000</td>
</tr>
<tr>
<td>MAJUMDAR, ADITI</td>
<td>483</td>
</tr>
<tr>
<td>MAK, ROBERT</td>
<td>2104</td>
</tr>
<tr>
<td>MAKANI, SAMIR</td>
<td>175</td>
</tr>
<tr>
<td>MALAK, LAWRENCE</td>
<td>2260, 2306</td>
</tr>
<tr>
<td>MALEK, MIKHAIL</td>
<td>180, 1673</td>
</tr>
<tr>
<td>MALEKIRAD, JACQUELINE</td>
<td>362</td>
</tr>
<tr>
<td>MALEKMANI, ARIENNE</td>
<td>2205</td>
</tr>
<tr>
<td>MALEKSHAMRAN, KEYVAN</td>
<td>1158</td>
</tr>
<tr>
<td>MALHOTA, ARATI</td>
<td>1501, 1502</td>
</tr>
<tr>
<td>MALIK, SUDHIR</td>
<td>635</td>
</tr>
<tr>
<td>MANALESE, MARIA THERESA</td>
<td>240</td>
</tr>
<tr>
<td>MANASSON, KATHERINE</td>
<td>44</td>
</tr>
<tr>
<td>MANCHEL, BRUCE.133, 717, 1067, 1068, 1576, 1577</td>
<td></td>
</tr>
<tr>
<td>MANCHESTER, KAREN</td>
<td>181</td>
</tr>
<tr>
<td>MANDEL, RONALD</td>
<td>41</td>
</tr>
<tr>
<td>MANECKE, KRISTEN</td>
<td>639</td>
</tr>
<tr>
<td>MANGINE, REGINA</td>
<td>1579</td>
</tr>
<tr>
<td>MANGOBA, LUTHER</td>
<td>60</td>
</tr>
<tr>
<td>MANI, MAJID</td>
<td>126, 334, 535</td>
</tr>
<tr>
<td>MANI, NASNIR.126, 159, 334, 535, 641, 1054, 1115, 1564</td>
<td></td>
</tr>
<tr>
<td>MANI, PARVIN</td>
<td>2038</td>
</tr>
<tr>
<td>MANNEN, JOSEPH</td>
<td>2338</td>
</tr>
<tr>
<td>MANNINO AVILA, ELIZABETH</td>
<td>2114</td>
</tr>
<tr>
<td>MANNINO, ELIZABETH</td>
<td>1783, 2062, 2063</td>
</tr>
<tr>
<td>MANORCARE HEALTH SERVICES</td>
<td>126, 27, 157, 574, 1648, 1911</td>
</tr>
<tr>
<td>MANRIQUEZ-CASTILLO, ERENDIRA</td>
<td>1435</td>
</tr>
<tr>
<td>MANSOUR, DAVID</td>
<td>154, 430</td>
</tr>
<tr>
<td>MANSOURY, HADI</td>
<td>253, 369</td>
</tr>
<tr>
<td>MANSY, GINA</td>
<td>138, 176</td>
</tr>
<tr>
<td>MANSY, TAMARA</td>
<td>1097</td>
</tr>
<tr>
<td>MANZANO, EUNICE</td>
<td>604</td>
</tr>
<tr>
<td>MAPON, CORINA</td>
<td>1943</td>
</tr>
<tr>
<td>MAPLES, RANDI</td>
<td>137</td>
</tr>
<tr>
<td>MAPLETON, SHARINA</td>
<td>34, 87</td>
</tr>
<tr>
<td>MARANDOLA, MICHAEL</td>
<td>449</td>
</tr>
<tr>
<td>MARANGI, KENT</td>
<td>484</td>
</tr>
<tr>
<td>MARANO, RACHEL</td>
<td>2114</td>
</tr>
<tr>
<td>MARC AURELE, KRISHELLE.651, 1756, 2016, 2114</td>
<td></td>
</tr>
<tr>
<td>MARCIAK, ROMAN</td>
<td>1366</td>
</tr>
<tr>
<td>MARCUS, DEKE</td>
<td>473</td>
</tr>
<tr>
<td>MARDACH, REBECCA</td>
<td>1989, 1990</td>
</tr>
<tr>
<td>MAREK BYKOWSKI, JULIE</td>
<td>318, 676</td>
</tr>
<tr>
<td>MAREK, MAYSYM</td>
<td>124, 711, 732</td>
</tr>
<tr>
<td>MARGER, MICHAEL</td>
<td>748</td>
</tr>
<tr>
<td>MARINESCU, CATALIN</td>
<td>256</td>
</tr>
<tr>
<td>MARJON, PHILIP.117, 214, 502, 623, 710, 727, 757</td>
<td></td>
</tr>
<tr>
<td>MARKMAN, LISA</td>
<td>242, 359, 360</td>
</tr>
<tr>
<td>MARKS, ROBERT</td>
<td>318, 676, 1811, 2150</td>
</tr>
<tr>
<td>MARLAY, GREG</td>
<td>2390</td>
</tr>
<tr>
<td>MARMUREANU, ALEXANDRU</td>
<td>273</td>
</tr>
<tr>
<td>MARRA, ALICE</td>
<td>1815</td>
</tr>
<tr>
<td>MAROSOK, MICHELLE.164, 283, 604, 708, 1943, 2194</td>
<td></td>
</tr>
<tr>
<td>MARQUE URGENT CARE</td>
<td>14</td>
</tr>
<tr>
<td>MARQUEZ, LUIS</td>
<td>69</td>
</tr>
<tr>
<td>MARR, RYAN.95, 173, 537, 645, 2331, 2341, 2347, 2354, 2365, 2377, 2378, 2390, 2391, 2410, 2411</td>
<td></td>
</tr>
<tr>
<td>MARRETT, AGATA</td>
<td>150</td>
</tr>
<tr>
<td>MARSDEN, CLAIRE</td>
<td>429, 430</td>
</tr>
<tr>
<td>MARSHALL HOUSE</td>
<td>2253</td>
</tr>
<tr>
<td>MARSHALL, CATHARINE</td>
<td>290</td>
</tr>
<tr>
<td>MARSHALL, LAWRENCE</td>
<td>1823, 2176</td>
</tr>
<tr>
<td>MARSHALL, STUART</td>
<td>323</td>
</tr>
</tbody>
</table>
E. 服务提供者索引

MARSTON, JACQUELINE.619, 1321, 1322
MARTIN, DAVID............................520
MARTIN, HALEY...309, 655, 1798, 2125
MARTIN, RIA..................1267
MARTIN, STEPHANIE...........544
MARTIN, THOMAS...............625, 1994
MARTINEZ ANDREE, INGRID.....1435
MARTINEZ, KENNETH. .............92, 93
MARTINEZ, NORAYMA. 184, 710, 2268
MARTINEZ, STEPHANIE. 135, 2260, 2480

MATTHESS, JANETTE..............283, 1720
MATTHEWS, MERRITT...........19, 56
MATTIOLE, TAYLOR.................309
MAUHILI, KENNA..............1907, 2287
MAUSER, JILL ELLEN.............709
MAXWELL, BENJAMIN ..........2279
MAXWELL, MELISSA...........2263
MAY, LOUIS.23, 157, 1097, 1550, 1551, 1648
MAYADEV, JYOTI.....................176
MAYER, ANDREW...................289
MAYET, KHADIJA.......................52
MAYOYO, MARILYN....111, 153, 604
MAZAREI, RAHELE........565, 760
MAZZA, DAVID......................133
MBA, MBA UZOMA......................288
MC CLEARY, DAVID..................223
MC DIARMID, JOHN...........511, 736
MC ELROY, CARTER .............2160
MCADAMS, JOSEPH...........1799, 2125
MCCAULEY, ROBERT...........2272
MCCALLION, DANIELLE...........284, 528
MCCALLION, PATRICK.............1627
MCCANN, JOHN..................2136, 2307
MCCANN, JEREMY.................691
MCCANN, RACHEL. 1859, 2074
MCCARTHY, KATHRYN...........1671
MCCAUL, DAVID.....................316
MCLAIN, MEGAN..............284, 604
MCCLAY, EDWARD..................171, 710
MCCLEAN, EMERALDA 302, 1772, 2365, 2411
MCCOWN, BARRY.154, 430, 1646, 1849
MCDONNELL, EMMA.126, 127, 159, 535
MCFARLAND, NATHAN.........48, 1178
MCGEE, JACQUELINE.105, 196, 570, 1604, 1696
MCGEHIN, KEVIN.124, 135, 711, 713, 732, 738
MCGILLOWAY, MELANIE...........604
MCGINTY, PATRICK.................163
MCGOWAN, GLAIZA ANN...........604, 605
MCGRATH, BENJAMIN..........471
MCGRAW, JOSEPH.173, 188, 300, 334, 535, 641, 2332, 2347, 2354, 2378, 2391, 2411
MCGUIRE, DESMOND............378, 551, 552
MCGUIRE, WILLIAM.316, 668, 1808, 2141
MCHENRY, KATHRYN.25, 29, 48, 62, 751, 1144, 1145
MCHONE, PATRICIA.................357
MCINTOSH, ANDREW..............412
MCINTYRE, DEBRA.................438, 736
MCINTYRE, SUSAN...................251
MCKENNEDY, MARIANNE......1027
MCKERAHAN, KELLY..................54
MCKESEY, JACQUELINE............112
MCKNIGHT, BRADEN.144, 148, 323, 691
MCLAUGHLIN, ERIK.................1982
MCMAHON, SHARON...............1062
MCMICHAEL, JESSICA..........467
MCMILLAN, MONICA..............113
MCMURRAY, SARAH...............170
MCMURREN, BRITTANY...........2342
MCNAMEE, CARRINE..............318, 677
MCNEALY HOUSE.................2247
MCPHERSON, SAMANTHA...........284
MEADOWS, AUDRA...............1764, 2038
MEAGHER, RAISHIELLE....718, 2324
MEAGLLA, JAMES............275, 406, 489, 591
MEDIC, IGOR.........................328, 1834
MEDILLO, LOVELLA.................605
MELDA, ALEXANDER...............56, 1204
MEDINA, NATALIE...............58, 59
MEDIINA, RUBELETA..............605, 1944
MEGALI, NICOLE..............103, 191, 309
MEGER, SONYA.........................328
<table>
<thead>
<tr>
<th>Name</th>
<th>Page Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEHARDA, SANJIWANI</td>
<td>33, 54</td>
</tr>
<tr>
<td>MEHBOOB, SALMAN</td>
<td>163, 171</td>
</tr>
<tr>
<td>MEHRANPOUR, PAYAM</td>
<td>328, 329</td>
</tr>
<tr>
<td>MEHROTRA, SACHI</td>
<td>169, 646</td>
</tr>
<tr>
<td>MEHTA, AMAL</td>
<td>228, 441, 742</td>
</tr>
<tr>
<td>MEHTA, CHANDRAKANT</td>
<td>441, 742</td>
</tr>
<tr>
<td>MEHTA, HIRSCH</td>
<td>108, 597</td>
</tr>
<tr>
<td>MEHTA, NOOPUR</td>
<td>191, 1691</td>
</tr>
<tr>
<td>MEHTA, PRATIK</td>
<td>520</td>
</tr>
<tr>
<td>MEHTA, RITVIK</td>
<td>129</td>
</tr>
<tr>
<td>MEHTA, VIVEK</td>
<td>267, 480</td>
</tr>
<tr>
<td>MEHTSUN, WINTA</td>
<td>325, 694</td>
</tr>
<tr>
<td>MEINEKE, RYAN</td>
<td>178</td>
</tr>
<tr>
<td>MEJIAS, JUAN</td>
<td>194, 195, 578</td>
</tr>
<tr>
<td>MEKEEL, KRISTIN</td>
<td>2189</td>
</tr>
<tr>
<td>MELBER, DORA1618, 1675, 1754, 1836, 1852, 1892, 2008, 2009</td>
<td></td>
</tr>
<tr>
<td>MELE, ANTHONY</td>
<td>473</td>
</tr>
<tr>
<td>MELENDEZ BERRIOS, IARA DEL.</td>
<td>1049, 1110, 1188, 1402, 1403, 1404, 1588</td>
</tr>
<tr>
<td>MELENDEZ, ARIANA</td>
<td>298, 637, 1765, 2039</td>
</tr>
<tr>
<td>MELGAR, MONICA</td>
<td>1323</td>
</tr>
<tr>
<td>MELKONIAN, VIKEN</td>
<td>459</td>
</tr>
<tr>
<td>MELL, LOREN</td>
<td>138, 176, 316, 670</td>
</tr>
<tr>
<td>MELOT, KAREN</td>
<td>209, 431</td>
</tr>
<tr>
<td>MELTZER, PAUL</td>
<td>237</td>
</tr>
<tr>
<td>MELTZER, VIRGINIA</td>
<td>605, 1268</td>
</tr>
<tr>
<td>MEMON, TALHA</td>
<td>499</td>
</tr>
<tr>
<td>MENDELSON, SUSAN</td>
<td>256, 372</td>
</tr>
<tr>
<td>MENDENHALL, ANNA</td>
<td>1134</td>
</tr>
<tr>
<td>MENDENHALL, GEORGE</td>
<td>279, 280</td>
</tr>
<tr>
<td>MENDES, CHANTAL1629, 1686, 2086</td>
<td>2247</td>
</tr>
<tr>
<td>MENEZ, ADRIANA664, 758, 2288, 2327</td>
<td>2247</td>
</tr>
<tr>
<td>MENEZ, ANDRES</td>
<td>1807, 2279</td>
</tr>
<tr>
<td>MENEZ, DIEGO125, 534, 638, 716, 1050, 1111, 1562</td>
<td>2247</td>
</tr>
<tr>
<td>MENEZ, JESUS</td>
<td>131, 1066</td>
</tr>
<tr>
<td>MENDIVIL, ALBERTO</td>
<td>247</td>
</tr>
<tr>
<td>MENDOZA, GRETIL MARIE1629, 1944</td>
<td>2247</td>
</tr>
<tr>
<td>MENDOZA, RAYMUNDO</td>
<td>2391</td>
</tr>
<tr>
<td>MENIFEE GLOBAL MEDICAL CENTER</td>
<td>11</td>
</tr>
<tr>
<td>MENN, STUART</td>
<td>177</td>
</tr>
<tr>
<td>MENON, POOJA</td>
<td>1028</td>
</tr>
<tr>
<td>MERALI, MURTZA</td>
<td>2378</td>
</tr>
<tr>
<td>MERCADO, BRYANT</td>
<td>554</td>
</tr>
<tr>
<td>MERCANDETTI, ALEX</td>
<td>593, 627</td>
</tr>
<tr>
<td>MERCER, KELLY161, 537, 655, 1123, 1124, 1220, 1455, 1456</td>
<td>2247</td>
</tr>
<tr>
<td>MERCER, SCOTT</td>
<td>28</td>
</tr>
<tr>
<td>MERLO, CLIFFORD</td>
<td>770</td>
</tr>
<tr>
<td>MERRILL, COREY</td>
<td>1799, 2125</td>
</tr>
<tr>
<td>MERRILL, SARAH</td>
<td>19, 1028</td>
</tr>
<tr>
<td>MERRITT, MARISA</td>
<td>754</td>
</tr>
<tr>
<td>MESBAH, AZITA</td>
<td>253</td>
</tr>
<tr>
<td>MESHKINPOUR, AZIN424, 425, 544, 545</td>
<td>2247</td>
</tr>
<tr>
<td>MESIWALA, ADNAN</td>
<td>1861, 2086</td>
</tr>
<tr>
<td>MESLEH SHAYEB, AKRAM</td>
<td>623</td>
</tr>
<tr>
<td>MESSENGER, BRADLEY199, 216, 420, 493, 494, 505, 729</td>
<td>2247</td>
</tr>
<tr>
<td>MESSHA, ANDREW</td>
<td>352</td>
</tr>
<tr>
<td>MESTAN, KAREN</td>
<td>1757, 2017</td>
</tr>
<tr>
<td>METCALF, ASHLEY</td>
<td>2086</td>
</tr>
<tr>
<td>METH, ERNIE</td>
<td>636</td>
</tr>
<tr>
<td>MEURICE, MARIELLE ERENDIRA</td>
<td>298, 638</td>
</tr>
<tr>
<td>LUCILLE</td>
<td>181</td>
</tr>
<tr>
<td>MIRANDA, CYNTHIA</td>
<td>539, 667</td>
</tr>
<tr>
<td>MIRKARIMI, MORTIZA</td>
<td>75</td>
</tr>
<tr>
<td>MIRON, JEAN-PHILIPPE...</td>
<td>662, 2308</td>
</tr>
<tr>
<td>MIRSAED GHAZI, POURYA</td>
<td>248</td>
</tr>
<tr>
<td>MIZRA, BASHAR</td>
<td>293</td>
</tr>
<tr>
<td>MISAGHI, AMIRHOSSEIN...</td>
<td>467, 484</td>
</tr>
<tr>
<td>MISHRA, GAURAV</td>
<td>135, 136</td>
</tr>
<tr>
<td>MISHRA-OCCINO, SEEMA....</td>
<td>2088</td>
</tr>
<tr>
<td>MISSION HERITAGE MED GPR.</td>
<td>15</td>
</tr>
<tr>
<td>MISSION HILLS POST ACUTE CARE.</td>
<td>781, 2249</td>
</tr>
<tr>
<td>MISSION HOSPITAL LAGUNA BEACH</td>
<td>11</td>
</tr>
<tr>
<td>MISTRY, CHETAN</td>
<td>1062</td>
</tr>
<tr>
<td>MITCHELL, CATHY</td>
<td>1139</td>
</tr>
<tr>
<td>MITCHELL, JESSE211, 212, 432, 498, 725, 726</td>
<td>2247</td>
</tr>
<tr>
<td>MITCHELL, PAUL</td>
<td>225, 737</td>
</tr>
<tr>
<td>MITIKU, TEFERI</td>
<td>236, 344</td>
</tr>
<tr>
<td>MLE, ERNIE</td>
<td>2247</td>
</tr>
<tr>
<td>MILLER, BRANDON</td>
<td>31, 85, 86</td>
</tr>
<tr>
<td>MILLER, BRIAN</td>
<td>341</td>
</tr>
<tr>
<td>MILLER, DONALD</td>
<td>1242</td>
</tr>
<tr>
<td>MILLER, EVA</td>
<td>1945</td>
</tr>
<tr>
<td>MILLER, HOWARD</td>
<td>292</td>
</tr>
<tr>
<td>MILLER, JAMES</td>
<td>96</td>
</tr>
<tr>
<td>MILLER, JAMIE</td>
<td>203, 256, 372</td>
</tr>
<tr>
<td>MILLER, JEAN</td>
<td>181</td>
</tr>
<tr>
<td>MILLER, JULIE</td>
<td>762, 2230, 2231</td>
</tr>
<tr>
<td>MILLER, KURT</td>
<td>459</td>
</tr>
<tr>
<td>MILLER, LAUREL</td>
<td>1456</td>
</tr>
<tr>
<td>MILLER, LUCY</td>
<td>330</td>
</tr>
<tr>
<td>MILLER, RYAN</td>
<td>438</td>
</tr>
<tr>
<td>MILLER, SCOTT</td>
<td>619, 1984</td>
</tr>
<tr>
<td>MILLON, TINA</td>
<td>209</td>
</tr>
<tr>
<td>MILLS, BRAD</td>
<td>2307</td>
</tr>
<tr>
<td>MILLS, DAVID</td>
<td>1861, 2087</td>
</tr>
<tr>
<td>MILLS, MARLIN</td>
<td>368, 369</td>
</tr>
<tr>
<td>MINASSIAN, ARPI</td>
<td>314, 315, 667</td>
</tr>
<tr>
<td>MINKA, GENEVIEE1629, 1686, 1841, 2087</td>
<td>2247</td>
</tr>
<tr>
<td>MIRACLE, ANGELYN</td>
<td>1850, 2212</td>
</tr>
<tr>
<td>MIRADI, MOHAMMED</td>
<td>329</td>
</tr>
<tr>
<td>MIRANDA, CYNTHIA</td>
<td>539, 667</td>
</tr>
<tr>
<td>MIRKARIMI, MORTIZA</td>
<td>75</td>
</tr>
<tr>
<td>MIRON, JEAN-PHILIPPE...</td>
<td>662, 2308</td>
</tr>
<tr>
<td>MIRSAED GHAZI, POURYA</td>
<td>248</td>
</tr>
<tr>
<td>MIRZA, BASHAR</td>
<td>293</td>
</tr>
<tr>
<td>MISAGHI, AMIRHOSSEIN...</td>
<td>467, 484</td>
</tr>
<tr>
<td>MISHRA, GAURAV</td>
<td>135, 136</td>
</tr>
<tr>
<td>MISHRA-OCCINO, SEEMA....</td>
<td>2088</td>
</tr>
<tr>
<td>MISSION HERITAGE MED GPR.</td>
<td>15</td>
</tr>
<tr>
<td>MISSION HILLS POST ACUTE CARE.</td>
<td>781, 2249</td>
</tr>
<tr>
<td>MISSION HOSPITAL LAGUNA BEACH</td>
<td>11</td>
</tr>
<tr>
<td>MISTRE, CHETAN</td>
<td>1062</td>
</tr>
<tr>
<td>MITCHELL, CATHY</td>
<td>1139</td>
</tr>
<tr>
<td>MITCHELL, JESSE211, 212, 432, 498, 725, 726</td>
<td>2247</td>
</tr>
<tr>
<td>MITCHELL, PAUL</td>
<td>225, 737</td>
</tr>
<tr>
<td>MITIKU, TEFERI</td>
<td>236, 344</td>
</tr>
<tr>
<td>Name</td>
<td>Page Numbers</td>
</tr>
<tr>
<td>-----------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>MONTBLEAU, KARA</td>
<td>2088</td>
</tr>
<tr>
<td>MONTANA-COLLINS, CLAUDIA</td>
<td>382</td>
</tr>
<tr>
<td>MONTANA, WILBUR</td>
<td>504</td>
</tr>
<tr>
<td>MONTEL, SEBASTIEN</td>
<td>473, 474</td>
</tr>
<tr>
<td>MONTEZ, REBECCA</td>
<td>2289</td>
</tr>
<tr>
<td>MONTENEGRO, CLAUDIA</td>
<td>69</td>
</tr>
<tr>
<td>MONTEZ, VIVIAN</td>
<td>191, 1691</td>
</tr>
<tr>
<td>MOORE, BRIAN</td>
<td>2366, 242</td>
</tr>
<tr>
<td>MOORE, CANDACE</td>
<td>149, 367</td>
</tr>
<tr>
<td>MOORE, HEATHER</td>
<td>164</td>
</tr>
<tr>
<td>MOORE, MADDIE</td>
<td>312, 655</td>
</tr>
<tr>
<td>MODENA, BRIAN</td>
<td>278</td>
</tr>
<tr>
<td>MODHWADIA, MAMTA</td>
<td>578, 2292</td>
</tr>
<tr>
<td>MOELLER-BERTRAM, TOBIAS</td>
<td>722</td>
</tr>
<tr>
<td>MOFFATT, KYRRA</td>
<td>1175</td>
</tr>
<tr>
<td>MOHEBD, ATHENA</td>
<td>1721, 1945</td>
</tr>
<tr>
<td>MOHENDRA, SUCHITRA</td>
<td>41</td>
</tr>
<tr>
<td>MOHLENBROCK, WILLIAM</td>
<td>151, 323</td>
</tr>
<tr>
<td>MOLINA, MYRNA</td>
<td>655</td>
</tr>
<tr>
<td>MOLINSKI, ALLISON</td>
<td>357</td>
</tr>
<tr>
<td>MOLL, ANGELA</td>
<td>68, 1896, 2218</td>
</tr>
<tr>
<td>MOREIRA, LUCILA</td>
<td>1247</td>
</tr>
<tr>
<td>MORDEN, JACQUELINE</td>
<td>309</td>
</tr>
<tr>
<td>MORTIMER, ASHA</td>
<td>1247</td>
</tr>
<tr>
<td>MOUNT MIGUEL COVENANT</td>
<td>2251, 2252</td>
</tr>
<tr>
<td>MOVAGHAR, MANSOOR</td>
<td>1661, 1681</td>
</tr>
<tr>
<td>MOYAL, ASHA</td>
<td>68, 1896, 2218</td>
</tr>
<tr>
<td>MUELLER, GEORGE</td>
<td>687, 2173</td>
</tr>
<tr>
<td>MUELLER, MATTHEW</td>
<td>284, 617, 1734, 1973</td>
</tr>
<tr>
<td>MUELLER, TARA</td>
<td>2074</td>
</tr>
<tr>
<td>MUNCE, DANIELLE</td>
<td>2000</td>
</tr>
<tr>
<td>MUNCA, CAESAR</td>
<td>298, 1767</td>
</tr>
<tr>
<td>MUNCH, DANIELLE</td>
<td>2251, 2252</td>
</tr>
<tr>
<td>MUNAVU, LILY</td>
<td>264, 265</td>
</tr>
<tr>
<td>MUNDI, JAGMEET</td>
<td>259, 384, 464</td>
</tr>
<tr>
<td>MUNOZ, JORGE</td>
<td>316, 668</td>
</tr>
</tbody>
</table>
E. 服务提供者索引

MUNYON, THOMAS.................498, 726
MURPHY, CARMEL.................1134, 1135
MURPHY, JAMES..................176, 2143
MURPHY, KEVIN..................670
MURPHY, PAUL.....................319, 677
MURRAY, BREANNA...............655
MURRAY, CARLA..................153
MURRAY, MATTHEW.............2088
MURRAY, STEVEN...............163, 281, 599
MURRIETA HEALTH AND
REHABILITATION CENTER.........780
MURTHY, NIKHIL...105, 322, 1605, 1823
NAGA, PAVAN......................9
NAGASUNDER, ARABHI....199, 215, 219,
433, 434
NAGATA, CERAH...................605
NAGEL, IRENE......................388
NAGELBERG, JODI.288, 618, 1084,
1085, 1301, 1738, 1977, 1978
NAGHI, JESSE............109, 119, 152, 158, 329,
1085, 1301, 1738, 2205
NAGISKIN, KAMAL..............406
NAGLASS, ROBERT...............411
NAGLASS, SHARMA.............1098
NAJAFI, DAVID.................335, 1417
NAJAND, SADAF.................574, 1911
NAJAR, FAUZI....................78, 659
NAKAMITSU, ABIGAIL...........2125
NAKAMURA, LEAH,...........275, 406, 407, 489,
490, 591
NAKAMURA, MELANIE.........1145
NAKAMURA, TIFFANY...........2006, 2309
NAMAZY, DAVID...............295, 626, 633
NAMBIAR, MARGARET.........222
NAM, NAVID......................411, 545, 546
NANAVATI, VIMAL............528, 573, 597
NANDI, SHANKHA...........730, 766, 767, 768
NANGIA, CHAITALI..........247
NAPOLEAN, REBECCA...........684
NAPOLI, LYNN....................42
NARANJO, RODRIGO.........1367, 1368
NARAYAN, ARCHANA...........1098, 1099
NARAYAN, HARI.1663, 1684, 1859,
2074
NARAYANAN, MEENA.109, 119, 152,
180, 597, 628, 707, 710, 1368
NARDI, MELISSA.................170
NARDI, SEAN.....................113
NARLA, VINOD....................278, 593
NARULA, ARVIN.................118, 597
NASH GOELITZ, ALYSSA........287
NASSERY, KRISTEN............571, 1908
NASSIR, BASSAM..............27, 1089
NATH, ASHOK...................219, 434, 435
NATH, DEVARSHI.80, 709, 1130, 1131,
1488, 1489, 1490, 2196
NATHAN, CARLY.287, 611, 1728, 1963,
1964
NAUDIN, VERONICA............1600
NAVA, PETER....................146, 558, 754
NAVARRO, ROSA...............106
NAVARRO, VANESSA.57, 82, 1205,
1533, 1872, 2205
NAWAR, MAGDY.................455
NAWAZISH, SABA................510
NAYAK, KESHAV...............598
NAZARY, AREZOU...............37
NEAL, JAMES....................507, 732
NEALEIGH, NATALIE...........514
NEESE, SUSAN.................320
NEGRON, CAROLINE...........181
NEGRON, RICARDO.192, 201, 577, 737,
1160, 1161
NEIGHBORHOOD HEALTHCARE.992,
993
NEIGHBORHOOD HEALTHCARE
ESCONDIDO.829, 830, 835, 836,
837, 838, 839
NEIGHBORHOOD HEALTHCARE
ESCONDIDO, ........................30, 1150
NEIGHBORHOOD HEALTHCARE
GOLD FAMILY HEALTH CENTER.872,
873
NEIGHBORHOOD HEALTHCARE
GOLD FAMILY HEALTH CENTER, 62,
1245
NEIGHBORHOOD HEALTHCARE
GRAND AVE....................830, 831, 832
NEIGHBORHOOD HEALTHCARE
LAKESIDE, ..........................48, 1177, 1178
NEIGHBORHOOD HEALTHCARE
PAUMA VALLEY, ........................871, 872
NEIGHBORHOOD HEALTHCARE
PAUMA VALLEY, .....................62, 1244
NEIGHBORHOOD HEALTHCARE
PEDIATRICS AND PRENATAL.828,
834, 835, 838
NEIGHBORHOOD HEALTHCARE
PEDIATRICS AND PRENATAL, 30,
1150, 1151
NEIGHBORHOOD HEALTHCARE
PEDIATRICS AND PRENATAL, ........834,
839
NEIGHBORHOOD HEALTHCARE
PEDIATRICS AND PRENATAL, ...30, 1151
NEIGHBORHOOD HEALTHCARE
VALLEY PARKWAY.831, 832, 833, 834,
839
NEIGHBORHOOD HEALTHCARE
VALLEY PARKWAY, .................30, 1151
NEJATI, FRESHTA.................1946
NELKIN, CORY....................170
NELMS, MICHAEL..............590, 655
NELSON, AISLYN................530, 574
NEMATI, MARYAM..............411
NEMCEFF, DENNIS..............197
E. 服务提供者索引

NESTOR COMMUNITY HEALTH CENTER........... 887, 888, 889, 890, 951
NESTOR COMMUNITY HEALTH CENTER........... 73, 1348
NETZEL, JENNIFER.............. 605, 1946, 1947
NEUSTEIN, PAUL........... 145, 148, 179, 326, 344, 697
NEVAREZ, IRENE........ 1195, 1196, 1269
NEVILLE, MARGARET........ 564, 758, 2289, 2327, 2328
NEWMAN, DAVID........ 524, 2379
NEYAZ, MOHAMMED........ 186, 575
NG, REBECCA........ 382, 462, 589
NG, EUNICE......................... 191
NG, HOA PHUONG........ 2413
NG, AN......................... 364
NG, ANDY........ 170, 209, 431
NG, ANTHONY........ 623, 1991
NG, BACH....................... 54
NG, BAO-THU........ 257
NG, BRUCE..................... 2414
NG, BRYANT........ 329, 628
NG, CARIE........ 19, 1029, 1030, 1533
NG, DANIELA........ 1596, 1891, 2223
NG, DAT..................... 40
NG, DAVID.................... 84
NG, DENNIS........ 546, 547
NG, DOUGLAS........ 450
NG, ETHAN.................... 90
NG, HAN........ 133, 134, 340, 471, 538
NG, HARRY................ 2160
NG, HOA PHUONG........ 2413
NG, HOANG........ 237, 2280, 2309
NG, HUONG........ 146, 148, 179, 326, 344, 697
NG, HUONG........ 69, 70, 75, 79, 621
NG, HUY........ 237, 250, 344, 345
NG, JASMINE........ 2413
NG, KELVIN........ 2413
NG, KHANG........ 694
NG, LETHUY........ 92
NG, LINH.................. 1029
NG, LINHKIEU........ 69, 70
NG, LETHUY........ 569
NG, MYLINH........ 2088
NG, NICO........ 78
NG, QUOC SY........ 1708, 1919
NG, QUYN......... 306, 649, 1784, 2063, 2064
NG, STEVEN........ 342
NG, THANG........ 84
NG, THANH........ 2413, 2414
NG, THERESA..... 2336, 2392, 2424
NG, THO........ 515
NG, THUY........ 128, 1626
NG, THUY-VY........ 131, 655, 656
NG, THUYTRANG........ 80
NG, TIAN........ 2379
NG, VI........ 1121
NG, VY........ 249, 626, 633
NG, VIET........ 566, 642
NG, YU-MING........ 237
NIAZI, HARRIS........ 1324, 1325
NIBARA, PIRAYEH........ 235, 353, 444
NIGRO, JOHN........ 2189
NIIHARA, MIKIO........ 220, 233, 435, 442
NIK, ANDREW........ 456
NIKACHINA, ANNA........ 224
NIKZAD, JASON........ 1205, 1206, 1534
NIJIO, ALAN................ 36
NING, GRACE........ 2136, 2309
NINH, CHRISTOPHER........ 271
NISHANIAN, GARABED........ 266, 267
NISHIMURA, MARIN........ 109, 152, 598
NISKANEN, RACHEL........ 2395
NISSAN, BETI........ 1568, 1569
NIZHEBORSKY, OKSANA........ 164
NOCEDA, ANA........ 605, 606, 1270
NOEL, NANCY........ 104
NOGUCHI, JONATHAN........ 378, 588
NOJAN, JOSEPH........ 469, 470
NOKES, BRANDON........ 293, 627, 1749, 2001
NOORIAN, NADER........ 53
NORBASH, ALEXANDER........ 319, 677
NORMAN, MARC........ 2137, 2310
NORMAN, STACY........ 553, 590
NORRIS, JEFFREY........ 1325
NORTH PARK FAMILY HEALTH CENTERS........ 895, 896, 897, 898, 899, 900, 901, 910, 911, 912, 954
NORTH PARK FAMILY HEALTH CENTERS........ 73, 1348, 1349
NORTON, MARILYN........ 117
NOSRATI, SAM........ 390, 471
NOSTE, ERIN........ 1734, 1973
NOURI, LABEED........ 162
NOURI, SARVENAZ........ 230, 744, 775
NOVAK, ERIKA........ 600
NOVAK, LOREN........ 88
NOVENCIDO, ANDREW........ 253, 539, 1637, 1638, 1705, 1879
NOVENCIDO, JOSEPH........ 20, 57
NOVENO, HILARIO........ 1872, 1947
NOVO, MEGAN........ 116, 156, 562, 620, 1613, 1647, 1986
NUNE, SUNITHA........ 505, 506
NUNO, JOSE........ 1456
NUQUI, JOSIE........ 1325
NUTHALL, KAITLIN........ 1815, 1816, 2161
NWAGWU, CHIEDOZIE........ 480
NWOSON, MICHAEL........ 86
NYAKUDARIKA, NATSALI........ 622
NYMAN, KATHERINE........ 1619, 1657, 1757, 1853, 2018
E. Service Provider Index

O

O C URGENT CARE MEDICAL GRP INC............................................15
O HALLORAN, HENRY.2348, 2355, 2414
O TOOLE, MARY..............................................372
O’CONNELL, STEFANY........1702, 1947
O’CONNOR, ERICA.................1011
O’DORAN, KAYLA........742, 1640, 2165
O’NEIL, NICOLE..........................209
O’ROURKE, COURTNEY.................78
OBEREMOK, STEVE.......................212
OBOYLE, MARY.............................319, 677
OBRIEN, KATHARINE......................33
OBZEJTA, NATALIA.........................700
OCAMPO, ELAINE................1271, 1272
OCEGUEDA, JOSHUA........57, 1206
OCHAO, ERLINDA................1077, 1196
OCHAO, RAUL................1520, 1521
OCONNOR, SHANNON.....................16
ODA, NINOS..................................523
ODA, THAGHAR.................1078, 1272, 1273
ODONNELL, F JANE.......................2019
OGANDO, SHEENA.............1474
OH, GERALD.....................................522
OH, IRENE................100, 186, 187, 296
OHALLORAN, HENRY.1662, 1681,
1856, 1896, 2048
OHARA, JUN ICHI..........................779
OJURI, ADEBAMBO..................717, 2261, 2310
OKADA, MICHELE....................309, 1799
OKAMOTO, VINCENT...........1708
OKADA, MICHELE....................1708
OKINAGA, PATRICIA.................682
OKONSKI, MICHELE....................347
OKWUOSA, CHRIS......................1579
OLENSKI, KLARI......................124, 711, 732
OLESCO, JENNIFER...............111, 529
OLIVA, CARLOS..........................89
OLIVEIRA, THOMAS..................1643, 1827
OLIVER, DEANNA.23, 78, 118, 147, 157,
184
OLSEN, MARTIN.........................1295
OLSON, CHERYL.........................322
OLSON, ERIK..........................685
OLSON, ROBERT.........................755
OLVERA, LUISA.................1078, 1079
OMAN, MATTHEW........202, 245, 246
OMIDI, SHOHREH......................356
OMRAN, JAD....................109, 152, 598
OMURO, ARTHUR...............100
ONEILL, SEAN.................................251
ONEILL, THERESE.......................182, 750
ONG, DONALD.........................88, 89
ONUOHA, NOJA................209, 724, 765
ONYEKWULUJE, ANNE................65
OPEN ARMS ADHC.........................2256
OPERATION SAMAHAN - MIRA
MESA..................885, 886, 887, 889, 950
OPERATION SAMAHAN - MIRA
MESA......................73, 1349
OPERATION SAMAHAN - NATIONAL
C..............................853, 861
OPERATION SAMAHAN - NATIONAL
C..............................58, 1210
OPERATION SAMAHAN GRANGER
SCHOOL BASED.........................852, 862
OPERATION SAMAHAN GRANGER
SCHOOL BASED.........................852, 862
OPERATION SAMAHAN RANCHO
PENASQUITOS.....................887, 888, 889, 949,
950, 951
OPERATION SAMAHAN RANCHO
PENASQUITOS....................73, 1297, 1350
OPTUM..................................................15
ORDINANZA, MYLENE..................1519
OREJEL, EDITH.........................606, 1948
ORFF, HENRY.........................2137, 2310
ORIENTE HOUSE.........................2253
ORLANDO, FRANCESCA.................158, 2263
ORPILLA, IMELDA............606, 1274, 1948
ORTEGA, JOSEPH.......................182
ORTEGA, LUIS.....................82, 1534, 2206
ORTEGA-ENDAH, DAVID................132
ORTIZ ILIZALITURRI, ANA.20, 57, 70,
82, 1535, 1536, 2206
ORTIZ, BEVERLY..................2289
ORTIZ, KENNETH...............1326, 1535
ORTIZ, MARIA..................2137, 2311
ORTIZ, TINA..........................454
OSHIDI, GANIVU..................493, 494, 495
OSORIO, JOSEPH...............1823, 1824, 2176
OSORIO, SANTIAGO....................570
OSTROM, NANCY.......................593
OSTRUP, RICHARD.323, 342, 343, 688
OSWALD, JESSICA.....................1708, 1919
OTAY FAMILY HEALTH CLINIC........805
OU, JOCelyn......................2338, 2379
OVIEDO-LINARES, RAUL.109, 119,
528, 552
OWEN, LISA.............................388
OWEN, MICHAEL........1015, 1016, 1275
OWYANG, ASHLEY...............258
OZAKI, YOSHIIRO.1629, 1687, 1841,
2089
OZCANN, ALI......................1862, 2089
OZGUR, BURAK.............................267
P

PAAMONI, ARIELLE.....................309
PACE, RACHELLE....................606
PACE, SARAH.................................44
PACHOE, MADISON....................164
PADE, KATHRYN.........................2089
PADILLA, MICHELE..................1275
PADUGA, REMIA...............100, 101, 187, 296
PAGE, BIANCA......................1176, 1295
PAI, SARAH.................................1948
PAIK, JULIANA.....................1166
PAKENHAM, KATE.....................1653
PALANCA, ARIEL.........................197
PALLIA, CHRISTOPHER.148, 323, 324,
1643, 1827
PALM TERRACE HLTHCARE AND
REHAB CTR......................780
PALMER, VIVIENNE...............388
PALOMAR FAMILY COUNSELING
SERVICES,..........................30
PALOMAR HEALTH.....................11, 2234
PALOMAR HEIGHTS CARE CTR.779,
2243
PALOMAR MEDICAL CENTER.11, 2235
PALOMAR VISTA HLTHCARE CTR.
..........................................779, 2243
PALOMINO, MARY....................20, 1030
PALOMINO, VERONICA........1326, 1327
PANDHI, JAY..........................528, 531, 532, 1874
PANDIT, LALITA.........................247, 252
PANDY, LIZANDER.......................80
PANDYA, BHUMIKA....................2342, 2380
<table>
<thead>
<tr>
<th>Name</th>
<th>Page Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>E. PARK</td>
<td>780, 2246</td>
</tr>
<tr>
<td>PARISH HILLS NURSING &amp; REHAB</td>
<td>780, 2245</td>
</tr>
<tr>
<td>PARY, LISA</td>
<td>177, 321, 685, 1668, 1819, 2167, 2168</td>
</tr>
<tr>
<td>PARSH, KEVIN</td>
<td>271</td>
</tr>
<tr>
<td>PASHMFOROUSH, MOHAMMAD</td>
<td>556</td>
</tr>
<tr>
<td>PASGINOLAN, MARI</td>
<td>149, 344, 447</td>
</tr>
<tr>
<td>PASTE, ERIK</td>
<td>407, 490</td>
</tr>
<tr>
<td>PASTORI, SIMONE</td>
<td>1170</td>
</tr>
<tr>
<td>PATAKAR, KAUSTUBUBH</td>
<td>420, 495, 505, 623, 729</td>
</tr>
<tr>
<td>PATEL, AARTI</td>
<td>2115</td>
</tr>
<tr>
<td>PATEL, ALPA</td>
<td>378</td>
</tr>
<tr>
<td>PATEL, AMAR</td>
<td>118, 122, 271, 400, 401, 417, 1621</td>
</tr>
<tr>
<td>PATEL, BAKULKUMAR</td>
<td>32</td>
</tr>
<tr>
<td>PATEL, BINOS</td>
<td>440</td>
</tr>
<tr>
<td>PATEL, DEVIN</td>
<td>2190</td>
</tr>
<tr>
<td>PATEL, GITAN</td>
<td>95, 159, 160, 189, 335, 536, 642, 2332, 2342, 2356, 2380, 2392, 2414, 2415</td>
</tr>
<tr>
<td>PATEL, HEMANSHU</td>
<td>40, 1171</td>
</tr>
<tr>
<td>PATEL, HITESH</td>
<td>585, 586, 591</td>
</tr>
<tr>
<td>PATEL, JANKI</td>
<td>168, 169, 1654</td>
</tr>
<tr>
<td>PATEL, JAY</td>
<td>253, 704, 705</td>
</tr>
<tr>
<td>PATEL, JIGAR</td>
<td>280, 595, 598</td>
</tr>
<tr>
<td>PATEL, JITENBHA</td>
<td>29, 751, 1145, 1146</td>
</tr>
<tr>
<td>PATEL, JYOTINKUMAR</td>
<td>46, 41</td>
</tr>
<tr>
<td>PATEL, KRUTI</td>
<td>293</td>
</tr>
<tr>
<td>PATEL, MILAN</td>
<td>355, 366</td>
</tr>
<tr>
<td>PATEL, MITA</td>
<td>372</td>
</tr>
<tr>
<td>PATEL, MITESH</td>
<td>569, 763, 2290, 2328</td>
</tr>
<tr>
<td>PATEL, NEHAL</td>
<td>361</td>
</tr>
<tr>
<td>PATEL, NIKHI</td>
<td>516, 764</td>
</tr>
<tr>
<td>PATEL, PAAVAN</td>
<td>20, 57</td>
</tr>
<tr>
<td>PATEL, RAKES</td>
<td>751</td>
</tr>
<tr>
<td>PATEL, REENABAN</td>
<td>34, 90</td>
</tr>
<tr>
<td>PATEL, SAGAR</td>
<td>504, 766</td>
</tr>
<tr>
<td>PATEL, SANJIV</td>
<td>237</td>
</tr>
<tr>
<td>PATEL, SARJAN</td>
<td>95, 159, 160, 189, 335, 536, 642, 2332, 2342, 2356, 2380, 2392, 2415</td>
</tr>
<tr>
<td>PATEL, VIJAY</td>
<td>1663, 1683, 1858, 1900, 2064</td>
</tr>
<tr>
<td>PATEMAN, CAROLYN</td>
<td>558, 754</td>
</tr>
<tr>
<td>PATHAK, BHAVANA</td>
<td>549</td>
</tr>
<tr>
<td>PATHAK, RAJIV</td>
<td>24</td>
</tr>
<tr>
<td>PATHAK, SAGAR</td>
<td>1669, 2100</td>
</tr>
<tr>
<td>PATHRIA, MINI</td>
<td>319, 678</td>
</tr>
<tr>
<td>PATIAG, DANIEL</td>
<td>606, 1275, 1276, 1949</td>
</tr>
<tr>
<td>PATS, ALEXIS</td>
<td>129, 338</td>
</tr>
<tr>
<td>PATERSON-HYATT, KIMBERLY</td>
<td>137, 2137, 2311</td>
</tr>
<tr>
<td>Patton, Daniel</td>
<td>232, 233</td>
</tr>
<tr>
<td>Patton, Michael</td>
<td>2311</td>
</tr>
<tr>
<td>Paul, MEGAN</td>
<td>1991</td>
</tr>
<tr>
<td>Paul, ROBERT</td>
<td>568</td>
</tr>
<tr>
<td>Paul, Supri</td>
<td>102</td>
</tr>
<tr>
<td>Paulhus, Patricia</td>
<td>209, 210, 431, 432</td>
</tr>
<tr>
<td>Paulitsch-Buckingham, Andrea</td>
<td>103</td>
</tr>
<tr>
<td>Paulson, Kerry</td>
<td>1722</td>
</tr>
<tr>
<td>Pavlovich, Wendy</td>
<td>1436, 1437</td>
</tr>
<tr>
<td>Payne, Richard</td>
<td>28</td>
</tr>
<tr>
<td>Pe, Mark-Rally</td>
<td>146, 148, 179, 326, 344, 579, 697</td>
</tr>
<tr>
<td>Pearson, Alex</td>
<td>316, 668, 1808, 2141</td>
</tr>
<tr>
<td>Pearce, Daniel</td>
<td>184, 215</td>
</tr>
<tr>
<td>Pedersani, Marjan</td>
<td>51</td>
</tr>
<tr>
<td>Pedersen, Erica</td>
<td>519</td>
</tr>
<tr>
<td>Pedersen, Suesan</td>
<td>578</td>
</tr>
<tr>
<td>Pedrotty, John</td>
<td>1030, 1031</td>
</tr>
<tr>
<td>Pedroza, Jennifer</td>
<td>132</td>
</tr>
<tr>
<td>Pejavar, Sunanda</td>
<td>138, 341, 670</td>
</tr>
<tr>
<td>Pelosi, Darren</td>
<td>174, 2090, 2126</td>
</tr>
<tr>
<td>Pelle, Michelle</td>
<td>615</td>
</tr>
<tr>
<td>Pena, Cesar</td>
<td>138</td>
</tr>
<tr>
<td>Pena, Jose</td>
<td>23</td>
</tr>
<tr>
<td>Pena, Nicholas</td>
<td>1457</td>
</tr>
<tr>
<td>Penera, Keith</td>
<td>471</td>
</tr>
<tr>
<td>Peng, Ying</td>
<td>346</td>
</tr>
<tr>
<td>Pennington, Jennifer</td>
<td>570, 764</td>
</tr>
</tbody>
</table>

---

<table>
<thead>
<tr>
<th>Name</th>
<th>Page Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>PE, RALLY</td>
<td>146, 148, 179, 326, 344, 579, 697</td>
</tr>
<tr>
<td>PEARCE, ALEX</td>
<td>316, 668, 1808, 2141</td>
</tr>
<tr>
<td>PEARCE, DANIEL</td>
<td>184, 215</td>
</tr>
<tr>
<td>PEDERSAN, MARJAN</td>
<td>51</td>
</tr>
<tr>
<td>PEDERSEN, ERICA</td>
<td>519</td>
</tr>
<tr>
<td>PEDERSEN, SUESAN</td>
<td>578</td>
</tr>
<tr>
<td>PEDROTT, JOHN</td>
<td>1030, 1031</td>
</tr>
<tr>
<td>PEDROZA, JENNIFER</td>
<td>132</td>
</tr>
<tr>
<td>PEJAVAR, SUNANDA</td>
<td>138, 341, 670</td>
</tr>
<tr>
<td>PELIO, DARREN</td>
<td>174, 309, 656, 1666, 1799, 1800, 2126</td>
</tr>
<tr>
<td>PELLE, MICHELLE</td>
<td>615</td>
</tr>
<tr>
<td>PENA ROMERO, CESAR</td>
<td>138</td>
</tr>
<tr>
<td>PENA, JOSE</td>
<td>23</td>
</tr>
<tr>
<td>PENA, NICHOLAS</td>
<td>1457</td>
</tr>
<tr>
<td>PENNERA, KEITH</td>
<td>471</td>
</tr>
<tr>
<td>PENG, YING</td>
<td>346</td>
</tr>
<tr>
<td>PENNINGTON, JENNIFER</td>
<td>570, 764</td>
</tr>
</tbody>
</table>

---

2486
E. 服务提供者索引

POWELL, STEPHANIE.......................1437
POWERS, BRET..............................233
POZUN, CARA...............................294
PRABHU, SUJATA.160, 189, 335, 336, 536, 642, 643, 2333, 2356, 2381, 2393, 2416
PRASAD, AMITHA..........................2268
PRASAD, RUPA.95, 96, 180, 573
PRATHER, ALYSON.......................185, 226
PRATHIPATI, LAKSHI......................59
PRATT, DONALD.............................53
PRATT, STEVEN.301, 336, 2367
PRENDIVILLE, PAUL......................348, 379
PRESKILL, CATALINA....................1437
PRESS, RAYMOND.........................683
PRESTERA, TORY............712, 2200, 2422
PRICE, ERIN................................687
PRICE, KERRY................................203
PRIEST, VIVIAN.............................2127
PRIESTLEY, ANGELIKA...................373, 386
PRIETO, ALEJANDRA.......................2195
PRIJATEL, SABRINA.......................656
PRINCE, RENEE............................2138, 231
PRITZKER, JOELY.558, 754, 1886, 2219
PROHASKA, THOMAS.......................598, 1924
ROMER, KATHERINE.83, 715, 1545, 1546, 1994, 2207
PROPS, TOBE...............................1328
PROVIDENCE MISSION HOSPITAL.11
PRUSS, ERIKA..............................1908, 282
PRZEKLASA AUTH, MELISSA............412
PUCCINELLI, ALAYNA.....................134
PUCHAKAYALA, NANDITA.227, 738, 769, 770
PUDOL, CHRISTOPHER..................561, 756
PUGH, MATTHEW..........................107
PUGMIRE, BRIAN.........................307, 651
PUIG LLANO, MANUEL.301, 643, 1769, 2049
PUTRUS, RAMIZ...........................25, 1090
PYLE, ALEXANDRA.132, 340, 656, 2127
PYRKO, PETER............................271, 417
QADRI, FARNOOUSH......................421
QASEEM, TAHIR.............................213
QASQAS, SHADI.............................419
QAYOUMI, WALI.296, 312, 635, 664, 1760, 2029, 2280, 2311
QUACH, PHUC.............................2381
QUAN, MARIA..............................760
QUAN, MICHELE.........................195, 1695
QUANG, TONY.............................516
QUE, HOWIE.................................134
QUENZER, FAITH.................113, 1610, 1735
QUEROL, CYRUS...........................226, 514
QUESNELL, TARA.........................100, 187
QUEVEDO, JUAN.........................633, 2022
QUICK, ELISABETH......................1067, 1458
QUIJANO, GLENN.........................656
QUILALANG, SUSAN.1016, 1068, 1069
QUINATA, FLORENCE....................507
QUINN, CATHERINE......................623
QUINN, ERIN...............................558
QUINN, MICHAEL.........................659
QUINONES-PEREZ, BIANCA.1687, 1833, 1903, 2090
QUINONEZ, JOSE.........................78
QUINTANA, PAULINA.....................2068
QUINTERO, CAROLYN.712, 1505, 2201
QUINTO, CINDY...........................1277
QUIROZ, ELISA.........................117, 145, 1040
QUISMORIO, DEMETRIO.................514
QURESHI, ALI...............................347
QURESHI, TAUSEEF.......................453, 474
RABBAN, DIANA.........................629
RACKHAM, KELLY.................1162, 1163
RAD, SHERVINO.........................701
RADMAN, MIRKA..........................606
RAOJOVIC, NATASHA.................2138, 2312
RADWAN, MOHAMMED..................293, 316
RADY CHILDRENS CONVALESCENT HOSPITAL.2249
RADY CHILDRENS HOSPITAL SAN DIEGO..........................2235
RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN.2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451
RAFIZAD, AMIR.........................235
RAGHUVANSHI, NAISHADH.501, 720
RAGUVEER, VISHAKA.....................1328
RAHIM, ARIANNA.......................103, 310, 577
RAHIM, BASIT...............................456
RAHIMI, MOHAMMAD....................465, 466
RAHIMI, NASSRIN.........................2230
RAHIMI, SINA..............................633
RAHMAN, HABIB.........................450
RAHMAN, MAISARA........................86
RAHMATNEJAD, KAMRAN.301, 643, 1769, 2049
RAHN, DOUGLAS.......................138, 176
RAHNMEDA, CYRUS......................396, 397
RAI, GEORGINA.........................656
RAISZADEH, RAMIN.178, 197, 691, 692
RAJA, MANIKANDA........................34
RAJAEI, NILOUFAR......................606, 1950
RAJAGOPAL, AMUTHA...............1995
RAJAIPOUR, NEGIN...........82, 1536, 1537
RAJAMANICKAM, ANITHA..............556
RAJPOOT, DEEPAK........................429
RAJSAUM, MARTIN.......................127, 336, 536
RAKOW-PENNER, REBECCA.319, 678
RALEIGH, DEBORAH......................1722
RALL, EMILY.........................656, 1459
RAMAMOORTHY, SONIA.321, 685, 1819, 2168
RAMASWAMY, DHARMARAJAN.229, 441, 742
RAMBACHER, THOMAS....................471
RAMERS, CHRISTIAN.....................1369
RAMGREN, AILEEN.......................1247
RAMINENI, NEELAKANTAN..............78
RAMIREZ SANCHEZ, CLAUDIA.83, 292, 625, 1552, 1745, 1995, 2207
RAMIREZ, ALFREDO........................1829
RAMIREZ, CRISTHIAN....................1328, 1329
RAMIREZ, HECTOR..........................63
RAMIREZ, NICOLE.286, 610, 1726, 1960
RAMIREZ, SARA.........................459, 586
RAMONA REHAB AND POST ACUTE CTR..........................779
RAMOS, CARLOS.........................1758, 2019
RAMOS, ELENA.............................568, 1906
RAMOS, JACQUELYN....................1650
RAMOS, JEFFREY..........................293
RAMSEY, KAYLA............................64

2488
<table>
<thead>
<tr>
<th>Name</th>
<th>Page Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>RANA, DEBORAH</td>
<td>1218</td>
</tr>
<tr>
<td>RANA, SHAUNAK</td>
<td>39, 40, 295</td>
</tr>
<tr>
<td>RANASURIYA, DUNISHA.</td>
<td>1862, 2091</td>
</tr>
<tr>
<td>RANCHO, GREGORY</td>
<td>668</td>
</tr>
<tr>
<td>RANCHO VISTA</td>
<td>782</td>
</tr>
<tr>
<td>RANDALL, JOSH.</td>
<td>490, 592</td>
</tr>
<tr>
<td>RANDLE, CARRIE</td>
<td>1950</td>
</tr>
<tr>
<td>RANJBARAN, ZIBA</td>
<td>469</td>
</tr>
<tr>
<td>RAO, AMOL</td>
<td>362</td>
</tr>
<tr>
<td>RAO, APARNA</td>
<td>1864, 2107, 2108</td>
</tr>
<tr>
<td>RAO, ROHIT</td>
<td>2074</td>
</tr>
<tr>
<td>RAO, SOUMYA</td>
<td>579, 1914</td>
</tr>
<tr>
<td>RAO, USHA</td>
<td>1146</td>
</tr>
<tr>
<td>RAO, VIKAS</td>
<td>480</td>
</tr>
<tr>
<td>RAPEPORT, KEVIN</td>
<td>281, 294</td>
</tr>
<tr>
<td>RAPPOR, ZHANNA</td>
<td>370</td>
</tr>
<tr>
<td>RASCH, DAMIAN</td>
<td>163</td>
</tr>
<tr>
<td>RASH, DOMINIQUE</td>
<td>158, 570</td>
</tr>
<tr>
<td>RASHCOVSKY SCHIFF, KARIN.</td>
<td>29, 1146</td>
</tr>
<tr>
<td>RASHID, AHSAN</td>
<td>37</td>
</tr>
<tr>
<td>RASI, ALFREDO</td>
<td>750</td>
</tr>
<tr>
<td>RASMUSSEN, DALE</td>
<td>1459</td>
</tr>
<tr>
<td>RASTOGI, ANIL</td>
<td>206</td>
</tr>
<tr>
<td>RASTOGI, ANISHA</td>
<td>206, 216</td>
</tr>
<tr>
<td>RATAJACZAK, CELESTE</td>
<td>210</td>
</tr>
<tr>
<td>RATHOD, RAJIV</td>
<td>379</td>
</tr>
<tr>
<td>RATNAYAKE, KRISTIN</td>
<td>2091</td>
</tr>
<tr>
<td>RATTNER, ZACHARY</td>
<td>678</td>
</tr>
<tr>
<td>RAVIKUMAR, ASHA</td>
<td>455</td>
</tr>
<tr>
<td>RAVINDRANATHAN, MEERA</td>
<td>503</td>
</tr>
<tr>
<td>RAY, ANE</td>
<td>750</td>
</tr>
<tr>
<td>RAY, BROOKE</td>
<td>611</td>
</tr>
<tr>
<td>RAYAN, SUNIL</td>
<td>177</td>
</tr>
<tr>
<td>RAYMOND, ALAIN</td>
<td>1844</td>
</tr>
<tr>
<td>RAYNOWSKA, JENELLE</td>
<td>635</td>
</tr>
<tr>
<td>RAYTA, NICOLE</td>
<td>1886</td>
</tr>
<tr>
<td>RAZZAQUE, SAQIB</td>
<td>623</td>
</tr>
<tr>
<td>RCH EAST COUNTY URGENT CARE.</td>
<td>2451</td>
</tr>
<tr>
<td>RCH MID CITY URGENT CARE.</td>
<td>2451</td>
</tr>
<tr>
<td>RCH NORTH COUNTY URGENT CARE.</td>
<td>15, 2451</td>
</tr>
<tr>
<td>RCH OCEANSIDE URGENT CARE.</td>
<td>2451</td>
</tr>
<tr>
<td>READ, TRENTON.</td>
<td>134, 192, 577, 1633, 1693, 1914</td>
</tr>
<tr>
<td>REAL, MARIA.153, 529, 606, 1079, 1196, 1197</td>
<td></td>
</tr>
<tr>
<td>REARDON, JACQUELINE.</td>
<td>114, 1611</td>
</tr>
<tr>
<td>REBEL, MARCIA</td>
<td>171</td>
</tr>
<tr>
<td>RECALDE, FRANCISCO.70, 75, 621, 1355</td>
<td></td>
</tr>
<tr>
<td>REDDA, ZACHARIA</td>
<td>348</td>
</tr>
<tr>
<td>REDDY, ANANTHAM</td>
<td>718</td>
</tr>
<tr>
<td>REDDY, ARJUN</td>
<td>27, 1100</td>
</tr>
<tr>
<td>REDDY, DANA.140, 1072, 1474, 1475</td>
<td></td>
</tr>
<tr>
<td>REDDY, JAGADEESH</td>
<td>452</td>
</tr>
<tr>
<td>REDDY, JOSIP</td>
<td>620, 621, 1987</td>
</tr>
<tr>
<td>REDDY, MADHUMITHA</td>
<td>526</td>
</tr>
<tr>
<td>REDDY, PRIYAL.</td>
<td>153, 529, 606, 607</td>
</tr>
<tr>
<td>REDDY, REDDIWANDLA.</td>
<td>329, 1831</td>
</tr>
<tr>
<td>REDDY, RYAN</td>
<td>255</td>
</tr>
<tr>
<td>REDDY, SMITHA.118, 140, 575, 579, 1915</td>
<td></td>
</tr>
<tr>
<td>REDDY, SUMANA.1013, 1073, 1514, 1515</td>
<td></td>
</tr>
<tr>
<td>REDFERN, CHARLES</td>
<td>623</td>
</tr>
<tr>
<td>REDIKER, DONALD</td>
<td>446</td>
</tr>
<tr>
<td>REDKAR, AVANTI</td>
<td>192</td>
</tr>
<tr>
<td>REDWOOD TERRACE</td>
<td>779</td>
</tr>
<tr>
<td>REED, KELLY</td>
<td>615</td>
</tr>
<tr>
<td>REED, KRISTIE.315, 1807, 2280, 2281</td>
<td></td>
</tr>
<tr>
<td>REED, SAVONNA</td>
<td>440</td>
</tr>
<tr>
<td>REEG, JESSICA</td>
<td>2320</td>
</tr>
<tr>
<td>REGEV, SHANEE.</td>
<td>607, 1079, 1080</td>
</tr>
<tr>
<td>REGO-KEARNEY, JENNIFER.312, 313, 314</td>
<td></td>
</tr>
<tr>
<td>REGID, CHRISTOPHER.1669, 1828, 2187</td>
<td></td>
</tr>
<tr>
<td>REIFENBERGER, JODY</td>
<td>1250</td>
</tr>
<tr>
<td>REIMERS, REBECCA.1618, 1675, 1836, 1852, 1853, 1892, 1989, 2009, 2010</td>
<td></td>
</tr>
<tr>
<td>REINER, GAIL</td>
<td>607</td>
</tr>
<tr>
<td>REISMAN, BRUCE</td>
<td>567</td>
</tr>
<tr>
<td>RENDLER, NATHAN.</td>
<td>1247</td>
</tr>
<tr>
<td>RENFROE, ILANA</td>
<td>284</td>
</tr>
<tr>
<td>RENZAS, JENNIFER.153, 154, 529, 607</td>
<td></td>
</tr>
<tr>
<td>REO VISTA HEALTHCARECTR.781, 2249</td>
<td></td>
</tr>
<tr>
<td>RESNICK, DONALD</td>
<td>319, 678</td>
</tr>
<tr>
<td>RESNIKOFF, PAMELA</td>
<td>668</td>
</tr>
<tr>
<td>RESTELLI, LYNDSEY</td>
<td>1832</td>
</tr>
<tr>
<td>RESTREPO, DALILAH</td>
<td>147</td>
</tr>
<tr>
<td>REUSCH, KEVIN</td>
<td>103, 568</td>
</tr>
<tr>
<td>REUTHER, MARSHA</td>
<td>173, 306</td>
</tr>
<tr>
<td>REVELES, DIANA</td>
<td>1067</td>
</tr>
<tr>
<td>REXINGER, KENNETH</td>
<td>65</td>
</tr>
<tr>
<td>REY, RODOLFO</td>
<td>421</td>
</tr>
<tr>
<td>REYNAGA, JOSUE</td>
<td>1544</td>
</tr>
<tr>
<td>REYNOLDS, RICHARD</td>
<td>55</td>
</tr>
<tr>
<td>REYNOSO, ALFONSO</td>
<td>1020, 1021</td>
</tr>
<tr>
<td>REZNICK, HARRELL</td>
<td>474</td>
</tr>
<tr>
<td>REZVAN, KAVEH.700, 702, 705</td>
<td></td>
</tr>
<tr>
<td>RHA, JANICE</td>
<td>228, 771</td>
</tr>
<tr>
<td>RHEE, KYUNG</td>
<td>2116</td>
</tr>
<tr>
<td>RHIANNON, JULIA</td>
<td>90</td>
</tr>
<tr>
<td>RHOSEN, REX LLOYD</td>
<td>1669</td>
</tr>
<tr>
<td>RIADH, MAYSAM</td>
<td>78</td>
</tr>
<tr>
<td>RIBEIRO CALDAS DOMINGUES.</td>
<td>664, 2312</td>
</tr>
<tr>
<td>ISABEL</td>
<td>659</td>
</tr>
<tr>
<td>RICE, BRITANY</td>
<td>96, 181, 1602</td>
</tr>
<tr>
<td>RICE, ELIZABETH</td>
<td>623, 624</td>
</tr>
<tr>
<td>RICE, KRISTEN</td>
<td>2281, 2312</td>
</tr>
<tr>
<td>RICH, RYAN.422, 566, 567, 761</td>
<td></td>
</tr>
<tr>
<td>RICHARD, MARLA</td>
<td>2281</td>
</tr>
<tr>
<td>RICHARDSON, ALVIE.1618, 1658, 1836, 1893, 2010</td>
<td></td>
</tr>
<tr>
<td>RICHARDSON, ANGELIQUE.1744</td>
<td></td>
</tr>
<tr>
<td>RICHARDSON, DANIELLE.1206, 1207</td>
<td></td>
</tr>
<tr>
<td>RICHARDSON, HENRY.130, 190, 568, 594, 652, 1630, 1689, 1905, 2119</td>
<td></td>
</tr>
<tr>
<td>RICHARDSON, JULIA.1627</td>
<td></td>
</tr>
<tr>
<td>RICHLAND, BRANDON</td>
<td>555</td>
</tr>
<tr>
<td>RICHTER, ALEXANDER</td>
<td>748</td>
</tr>
<tr>
<td>RICKARDS, ENASS.144, 342, 343, 688, 692</td>
<td></td>
</tr>
<tr>
<td>RICKERTS, MATTHEW</td>
<td>2161</td>
</tr>
<tr>
<td>RIEDL, MARC</td>
<td>1917</td>
</tr>
<tr>
<td>RIEGO, SUZANNE</td>
<td>1950</td>
</tr>
<tr>
<td>RIES, DAVID</td>
<td>2116</td>
</tr>
<tr>
<td>RIGGINS, NINA</td>
<td>635, 2030</td>
</tr>
<tr>
<td>RILEY, JESSICA</td>
<td>97, 167, 584, 615</td>
</tr>
<tr>
<td>RING, ROBERT.567, 645, 1898, 2395</td>
<td></td>
</tr>
<tr>
<td>RIOS, SIERRA.</td>
<td>2269</td>
</tr>
<tr>
<td>RISSER, JOSEPH.1466, 1467, 1983</td>
<td></td>
</tr>
<tr>
<td>RITCHIE, DAVID.319, 678, 1812, 2151</td>
<td></td>
</tr>
<tr>
<td>RITTER, AARON</td>
<td>263</td>
</tr>
<tr>
<td>RITTER, STEVEN.70, 1329, 1537</td>
<td></td>
</tr>
<tr>
<td>RIVA, GREGORY</td>
<td>206, 216</td>
</tr>
<tr>
<td>RIVADENEYRA, ADAM</td>
<td>242</td>
</tr>
<tr>
<td>RIVAS, RENEE</td>
<td>1765, 1766, 2040</td>
</tr>
</tbody>
</table>
E. 服務提供者索引

RIVERA, MARCELO................................. 63
RIVERA, MIDORI................................... 39, 88
RIVERO, JORGE................................. 42
RIZKALLAH, JEAN................................. 20
RIZNIS, TENGIS..................................... 361
RIZVI, SYED........................................... 220, 435, 732
ROADMAN, KEENE............................... 286, 610
ROBERSON, ANDREA.............................. 64
ROBERTS, AUDREY................................. 1800, 2127
ROBERTS, BENJAMIN.............................. 512
ROBERTS, JAMES................................... 146, 149, 179, 326, 344, 697
ROBERTS, KENDALL.................................. 1170
ROBERTS, LISA......................................... 517
ROBERTS, POMAI.................................... 57, 1207, 1873
ROBERTS, TODD...................................... 512
ROBERTSON, ASHA.................................. 91
ROBERTSON, ELSIE................................. 397, 479
ROBERTSON, RACHAEL......................... 607, 1951
ROBICHAUD, FAITH................................. 132
ROBINSON, COLE.................................. 180, 1670
ROBINSON, DAISY................................. 200, 1167, 1701
ROBINSON, DEAN.................................. 211, 1139, 1140, 1966
ROBINSON, FANE.................................. 566, 643
ROBINSON, JENELLE............................... 132, 720
ROBINSON, MATTHEW.............................. 748
ROBKER, JERRICK.................................. 692
ROBLEDQ, DAMIAN................................. 184, 729, 2269
ROCHE, CHELSEA.................................... 1722
RODARTE, GABRIEL................................. 193, 194, 1147, 2269, 2273
RODDICK, JASON................................. 226
RODENMEYER, EYE................................. 607, 1951
RODRIGUEZ, DACIALD............................. 450
RODRIGUEZ JEREZ, ROBERTO................. 1050, 1111, 1112, 1189, 1405, 1406, 1407, 1588, 1589
RODRIGUEZ MARTINEZ, RENIL................... 1301
RODRIGUEZ, ALDO................................. 1121, 1122, 1438, 1569, 1570, 2209
RODRIGUEZ, CASSANDRA.......................... 1071
RODRIGUEZ, JAVIER.................... 1437, 1438
RODRIGUEZ, NATALIE............................. 115, 619
RODRIGUEZ, NITZA................................. 346
RODRIGUEZ, SEAN................................. 70, 1329
RODRIGUEZ-MINETTE, JESSICA.............. 765
ROESKE, RICHMOND................................. 189, 301, 643
ROGERS, MEGAN................................. 114, 115
ROGERS, TANYA.................................... 1278
ROHGANI, REZA................................. 744, 749
ROJAS, RICHARD................................. 1296
ROJAS, STEVEN................................. 715, 1537, 1538
ROKHSHADFAR, SAGHI.......................... 46, 53
ROMA, ANDRES................................. 1791, 2068
ROMERO, CAMILA................................. 659, 1467, 1468, 2131
ROMERO, KENNETH............................... 106
RONAK, KEVIN................................. 146, 200, 567, 762, 1235, 1236, 1597, 1598
RONCAROLO DE VRIES, ROXANE........... 1886
RONQUILLO, KAREN AN........... 1025, 1090, 1647
RONQUILLO, RINA................................. 1175
ROOIHAN, ARSHIA................................. 262, 413
ROSA, ADAM.......................................... 2396
ROSADO, IVAN....................................... 20, 1330, 1967
ROSANOLO, SALVATORE......................... 355
ROSCE, SYDNEY................................. 607, 1951
ROSE, BRENT......................................... 138, 176
ROSE, PATRICIA..................................... 1582
ROSEN, JAY............................................ 104
ROSENBAUM, HERBERT......................... 1538
ROSENBERG, ERIK................................. 612
ROSENBERG, GARY................................. 749
ROSENBLATT, EUGENE............................ 1033
ROSENBLATT, SHERI............................... 161, 717, 718, 1124, 1650, 2210
ROSENFIELD, SAMUEL......................... 467, 485
ROSENFIELD, ALAN............................... 144, 145, 692, 717
ROSENGARTEN, ARTHUR.......................... 150, 151
ROSS, ANDREW................................. 198, 199, 559, 719, 726
ROSS, BRIDGET.................................... 754
ROSS, COLLIN........................................ 1574, 1575
ROSS, CRYSTAL................................. 111, 607, 1017, 1952
ROSS, JENNY......................................... 682
ROSSOLO, LORENZO............................... 585
ROSSI, CATHERINE................................. 284, 607, 1722, 1952
ROUEL, LINDA................................. 25, 1100
ROUEL, WADI................................. 27, 1100, 1101, 1214, 1369
ROUGH, STEVEN................................. 109, 119, 120, 528, 532, 1616, 1874
ROUGHLEY, MATTHEW.......................... 261
ROUHANI, BEHNAZ................................. 379, 588
ROWAN, RYAN......................................... 737
ROWHANI, NAGHMEH.............................. 130, 1630
ROWSHAN, KASRA................................. 749
ROXAS, RODERICK................................. 114, 1611
ROY, KEVIN......................................... 278, 593
ROZO, JOSE............................................ 607, 1952
RUBENSTEIN, KELLY.............................. 681
RUBENSTEIN, STUART............................. 1438
RUBENZIK, TAMARA.............................. 169, 291, 624, 757, 1654, 1655, 1745, 1992, 2224
RUBIO GARCIA, MANOLO......................... 120, 158, 184, 628, 710
RUBY, CHARLES.................................... 279
RUDD, CHRISTOPHER.............................. 1816, 2161
RUDE, LOREN......................................... 258
RUDOLF, FRANCES................................. 1735, 1974
RUELAS, ROBERTO................................. 1570
RUETENIK, BRAD................................. 174
RUFO, ROSAVIDA................................. 607
RUH, MONICA........................................ 2091
RUZ-L-FLORES, ROSE......................... 422, 514
RULLAN, JENNIFER................................. 112
RULLAN, PETER................................. 112
RUMMANI, BENNY................................. 170
RUMMEL, LAURA................................. 346
RUNGVIVATJARUS, TIRANUN.................... 2116
RUSSELL, SAMUEL................................. 1903, 2091, 2092
RUSSO, KRISTA................................. 1012, 1013, 1243, 1244, 1250, 1511, 1512
RUSSO, MICHAEL................................. 94
RUSSO, ROBERT................................. 281
RUTMAN, MICHAEL................................. 90
RUTTEN, SONIA....................................... 51
RYAN, DANA......................................... 233, 1168, 1703
RYAN, KYLE................................. 1689, 1866, 1906, 2119
RYAN, TYLER................................. 161
RYU, JULIE................. 2108

S

SAADAT, ARDAVAN.................................. 524
SAADAT, FARID................................. 47
SAAM, SHIDA........................................ 36
SAB, SHIDA........................................... 163, 281
E. Service Provider Index

SAID, ENGY .................................................. 593
SAFARI, ROOZCHEHR ........................................ 64
SALIMI-TARI, PEYMAN .............................. 362
SALHASI, AMIRALI ............................ 146, 149, 179, 326,
1847, 2191
SALO, CLINT ........................................ 263, 264
SALOTTI, JOANIE .................................. 607
SAMADY, JOSEPH ....................... 199, 560
SAMANI, PARGOL ..................................... 62, 556
SAMSI, AMIRALI .......................... 146, 149, 179, 326,
344, 698, 1642, 1644, 1847, 2191
SAMPATH, SRIHARI .................. 319, 678, 679
SAMPATH, SRINATH ..................... 319, 679
SAMPATH, SRIVIDYA .......................... 1439
SAMPSON, ANDRIECE ...................... 1953
SAMUEL, MICHAEL .......................... 301, 336, 437,
2348, 2356, 2381
SAN DIEGO AMERICAN INDIAN
HEALTH CENTER .......................... 895, 955
SAN DIEGO AMERICAN INDIAN
HEALTH CENTER, ............... 73, 1350
SAN DIEGO FAMILY CARE ........................ 874, 879,
880, 951
SAN DIEGO FAMILY CARE, 73, 1350,
1351
SAN DIEGO FAMILY CIRCLE ADULT
DAY HEALTH CARE ......................... 2257
SAN DIEGO POST ACUTE CENTER.
 ..................................................................... 778, 2241
SAN JACINTO HEALTHCARE ....... 779
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE ......................... 918, 920, 952
SAN YSIDRO HEALTH 25TH ST
FAMILY MEDICINE, ....................... 73, 1351
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE ..................... 783, 784, 785
SAN YSIDRO HEALTH ALPINE
FAMILY MEDICINE, ...................... 16, 1005
SAN YSIDRO HEALTH CHC - OCEAN
VIEW ............................................. 929, 930, 931, 956
SAN YSIDRO HEALTH CHC - OCEAN
VIEW ............................................... 73, 1351
SAN YSIDRO HEALTH CHULA VISTA.
789, 790, 791, 792, 797, 798, 799,
800, 801, 802, 803, 806
SAN YSIDRO HEALTH CHULA VISTA,
 ................................................................ 21, 1039
SAN YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED. 909, 910, 953
SAN YSIDRO HEALTH COMMUNITY
HEIGHTS FAMILY MED, .................. 74, 1352
SAN YSIDRO HEALTH EL CAJON 807,
808, 809, 810, 825
SAN YSIDRO HEALTH EL CAJON, 26,
1093
SAN YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE ........... 828, 829, 839
SAN YSIDRO HEALTH ESCONDIDO
FAMILY MEDICINE, ....................... 30, 1152
SAN YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR 969, 970,
972, 973, 974, 975, 976, 987
SAN YSIDRO HEALTH MATERNAL
AND CHILD HEALTH CTR, .......... 82, 1543
SAN YSIDRO HEALTH NATIONAL
CITY ..................................852, 859, 860, 862
SAN YSIDRO HEALTH NATIONAL
CITY .................................................. 58, 1211
SAN YSIDRO HEALTH PARADISE
HILLS .................................................. 857, 858, 859, 861
SAN YSIDRO HEALTH PARADISE
HILLS .................................................. 58, 1211
SAN YSIDRO HEALTH PRECISION
PARK ........................................................ 74
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER. 964, 965, 966, 967, 968, 969, 970, 971, 972, 976, 977, 978, 979, 980, 981, 982, 987
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER. 82, 1543
SAN YSIDRO HEALTH SOUTH BAY. 58, 121, 1212
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS. 982, 983, 984, 985, 986, 987
SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS. 82, 1544
SANACORA, RACHEL. 1904, 2092
SAN YSIDRO HLTH SAN DIEGO PACE HEALTH CENTER. 82, 1543
SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER. 964, 965, 966, 967, 968, 969, 970, 971, 972, 976, 977, 978, 979, 980, 981, 982, 987
SAN YSIDRO HEALTH SOUTH BAY. 855, 856, 861
SAN YSIDRO HEALTH SOUTH BAY LATINO RESEARCH CENTER. 21
SANADA, VIVIANE. 1904, 2092
SANADA, YAHaira. 210
SAN CANYON URGENT CARE MED CTR. 15
SANCHEZ, EMILY. 440, 441
SANCHEZ, ADRIANA. 564, 758, 2290
SANCHEZ, LUIS. 138
SANCHEZ, MICHAEL. 1801
SANCHEZ, MYRNA. 1520
SANCHEZ, YAHAIRA. 210
SAND CANYON URGENT CARE MED CTR. 15
SANDERS, JESSICA. 94, 1001
SANDHU, AJAY. 176, 316, 670
SANDHU, BASANT. 1147
SANDLER, BRYAN. 687, 2174
SANDLER, JEFFREY. 618
SANDOC, EMILY. 2416
SANGODKAR, SANDEEP. 198, 199, 217, 420, 723
SANGUEDOLCE, JOHN. 348
SANICOLAS, MARIA THERESA. 538
SANTANGELO, JOANNE. 608, 1280, 1281, 1953
SANTIAGO, AMANDA. 558, 1887
SANTIAGO, ROXANE. 1064
SANTILLAN, CYNTHIA. 319, 679
SANTOMAURO, MICHAEL. 146, 698
SANTORELLI, JARRETT. 1821, 2174
SANTOS CAVAIOLO, TRICIA. 1739, 1978
SANUCCI, SHAUN. 62
SAPRA, SONIA. 1051, 1112, 1189, 1407, 1408, 1409, 1589
SARABI, DENNIS. 550
SARAFIAN, FARJAD. 248
SARCON, ANNAHITA. 353
SARNOFF, ROBERT. 175
SARSAM, LUAY. 110, 152, 181, 598, 707, 708
SARSAM, SINAN. 720, 723
SARVAR, NADIA. 291
SARWARI, NAWID. 214, 503, 624, 757
SASSANI, PATRICK. 127, 336, 536
SASSIC, JESSICA. 1370
SATEEHS, BROOKE. 155, 156, 530, 574
SATTAR, SHIFTEH. 635
SATTERFIELD, KELLIE. 301, 643, 734, 1770, 2050
SATURE, CHARLES. 1657, 1676, 1758, 1912, 2019, 2020
SAUNDERS, ANGELA. 727
SAUNDERS, PHILLIP. 117, 214, 503, 624, 1408, 1409, 1589
SAUNDERS, AMAN. 98, 100, 187
SAVAR, AARON. 734
SAVAR, LOUIS. 734
SAVILLE, EDITH. 1283
SAWHRNEY, NAVINDER. 180, 1674
SAWHRNEY, SAJEET. 253
SAWYER, CAROLYN. 2313
SAZEGAR, PAYAM. 25, 57, 70
SBIROLO, EMILY. 114
SCARLETT, YVONNE. 752
SCHACHTER, JESSICA. 250
SCHAEFFER, CYNTHIA. 156, 621, 649
SCHAEPE, RHODORA. 754, 1595
SCHALCH LEPE, PAUL. 129, 306, 339, 649
SCHALLING, KRISTO. 2138, 2139, 2313, 2314
SCHER, BARRY. 127, 336
SCHIEDERMAYER, BENJAMIN. 320, 684, 1818, 2166
SCHIFFMAN, GEORGE. 453, 474
SCHIM, JACK. 100, 101, 297
SCHLECHTER, JOHN. 467, 485
SCHLOSSER, TARA. 630, 2314
SCHMALHAUS, MONTE. 471, 472
SCHMIDT, BRYAN. 1473
SCHMIDT, LILA. 638
SCHMIEDECKE, RUDY. 615
SCHMITT, EVA. 2127
SCHNEEBERGER, ANDRES. 312, 2281
SCHNEIDER, DARIUS. 289, 574
SCHNEIDER, SARAH. 1068, 1463, 1464
SCHNEIDER-MUNOZ, MARGARITA. 1553
SCHNICKEL, GABRIEL. 2189
SCHOEBELL, BIANCA. 656
SCHONBACH, ETIENNE. 301, 1770
SCHOONMAKER, JOHN. 84
SCHORR, EMILY. 172, 635, 1658, 2050
SCHROIFER, NOAH. 572
SCHROEDER, JENNIFER. 2128
SCHROEDER, MARY. 558, 1889
SCHROTER, STEPHANIE. 1862, 2092
SCHUETZ, HESTON. 291
SCHULTZ, JESSICA. 297, 635, 1760
SCHULTZ, HEATHER. 1812, 2152
SCHULTZ, JAMES. 86, 87, 751, 1148, 1593
SCHULTZ, JEFFREY. 692
SCHULTZEL, MARK. 178, 692, 749
SCHULTZEL, MATTHEW. 177, 321, 322
SCHULZ, STEFAN. 2128
SCHUMAKER, EDWARD. 1091, 1207, 1330
SCHWAB, GARY. 645, 2052
SCHWARTZ, KRISTY. 2093
SCHWARTZ, MARISSA. 552
SCHWARTZEL, KEVIN. 1801
SCHWARTZMAN, BENJAMIN. 630
SCHWARZ, ERNST. 495, 505
SCHWARZ, KATHLEEN. 2100
SCHWEIKERT, SUZANNE. 565, 1463, 1464
SCHWEIKERT, SUSAN. 565, 1500, 1501
SCHWENDEMANN, WADE. 1837, 1893, 2011
SCHWERKOSKE, JOHN. 117, 214, 503, 624, 727, 757
SCHWINDT, CHRISTINA. 540
E. 服務提供者索引

SCLAR, CRAIG. .................................628, 629
SCOTT, EMILY........................................629
SCOTT, JEFFREY.190, 511, 512, 2342,
2381, 2393
SCOTT, KELLY. ....................................608
SCOTT, LAGINA. ...........................70, 1331, 1984
SCOTT, RYLEE................................1330, 1331
SCOTT, SUSAN. .................................515
SCOTT-WYARD, PHOEBE. ...1866, 2119
SEAMAN, CHRISTOPHER. .............495, 729
SEARLEMAN, ADAM.319, 679, 1812,
SEAMAN, MARY. ................................... 1283
SCRIPPS GREEN HOSPITAL..... 11, 2235
SCRIPPS MEMORIAL HOSPITAL.11,
2235
SCRIPPS MEMORIAL HOSPITAL
ENCINITAS. ........................................ 11, 2236
SCRIPPS MERCY HOSPITAL.11, 2236
SCRIPPS MERCY HOSPITAL CHULA
VISTA. ................................................. 11, 2236
SCUDDAY, TRAVIS. .............................. 271
SEAMAN, ALEXANDRA.128, 1627, 2337
SEARLEMAN, ADAM.319, 679, 1812,
1283
SEIBET, TYLER.......................................... 176
SEIFER, TARA. ........................................ 247
SEIBER, TALIA......................................... 704
SEILNACHT-BERNARD, KAREN.182,
1672
SEITZ, GRETCHEN......................600, 1927
SEKO, KYLE. ........................................ 261
SELBY, BLAKE.....................................1954
SELECT SPECIALTY HOSPITAL SAN
DIEGO...........................................11, 2236
SELMGSOHN, BRUCE. ............................. 53
SLETZER, JUSTIN. ..............................288, 1736
SENA, TIFFANY....................................1954
SERAG, RANDA. ..................................... 38
SERAILE, KIRSTEN. .............................. 432
SERGEYEV, YELENA............................. 53
SERING, MALIA........................................ 200, 712
SERIO, TAYLOR.................................2314
SERN, SANDY........................................ 80
SERPAS, SHAILA.................................1033
SERRATO, ANTHONY............................754
SERRY, ROD................................181, 575, 1670, 1675,
1912
SEBASKY, MEGHAN................1750, 2001
SEBASTEIN, MANOUCEHER. ............... 212
SEBAIK, AHMED.........................1791, 2069
SHAD, JAYAID.................................562
SHACKET, KATHERINE.156, 621, 1613,
1987
SHAF, ALEXANDER.115, 147, 156, 183
SHAH, ABHISHEK.107, 110, 151, 152,
180, 181, 596, 598, 707, 708
SHAH, KALPIT. .................................692
SHAH, KETAN......................................... 361
SHAH, KULIN.110, 120, 152, 158, 181,
184, 598, 629, 708, 710
SHAH, MEERA........................................ 1170
SHAH, MITA. ......................................... 2022
SHAH, NANDI.................................167, 289, 618
SHAH, NEMI......................................507, 526, 1660, 2041
SHAH, SALMA.................................251
SHAH, SHAILJA...............290, 621, 1741, 1988
SHAH, SHEENA.................................132, 537
SHAHAMIRI, SEAN............................... 249
SHAHAN, FRED..................................615
SHAHATTO, LOBNA..........................2001
SHAHBAZ, LINNAE.558, 754, 1887,
2219
SHAHBAZ, MAJD. .............................. 40, 339
SHAHBAZIAN, MICHAEL.352, 444, 582
SHAHIDYAZDANI, TINA. ..................... 1571
SHAHIM, ZAHRA................................. 41
SHAHINIAN, GEORGE. 94, 349, 392
SHAHTAJI, ALAN...............................1034, 1539
SHAIKH, ANWER.215, 218, 505, 624,
631
SHAJAN, JOSHAN................................. 78
SHALABY, MOHSEN.........................35
SHALI, REYZAN................................. 90
SHAMANI, AZAM................................. 70
SHANNON, KELLI...............................2011
SHAPERA, EMANUEL......................322, 744
SHAPIRO, HILARY................................ 281, 1712
SHAPIRO, MARK........186, 187, 575, 633
SHAPIRO, ROBERT..........................572
SHAPIRO, STEVEN.............................. 499
SHARABI, ANDREW............................176, 670
SHARAF, KAREEM............................. 310
SHARF, ALBERT. ............................120, 158, 532
SHARIF TABRIZI, AHMAD. ..............297, 636
SHARMA, KUSUM.....................105, 278, 593
SHARMA, RAHU.................................397, 399
SHARMA, RAKHI................................. 608
SHARMA, SURENTRA......................... 230
SHARP CHULA VISTA MED CTR. 2236
SHARP CORONADO HOSP AND
HEALTHCARE CTR..........................2237
SHARP MARY BIRCH HOSP FOR
WOMEN AND NEWBORNS...........2237
SHARP MEMORIAL HOSPITAL.........2237
SHARP, LORRA..........................198, 1698
SHARP, SIMPSON...............................320
SHARPE, NORMA.657, 1006, 1160,
1459, 1460, 1575
SHATZER, ANNA................................. 210
SHASKY, GARY.......................151, 327, 595
SHAU, SHERA.................................1801, 2128
SHAVER, JOHN. ..............................267, 397, 479
SHAW, BLAKE.................................1418
SHAW, BRIAN.................................362
SHAW, SUSANNA...................1709, 1920
SHE, WU...........................................356
SHEETS, ROBERT.........................2108
SHEETZ, TYLER..............................326, 698
SHEHATA, HANNAH LOUISE.............. 507
SHEIDAYI, PERRY......................... 36
SHEIKH MOHAMED, AMIRA..............1553
SHEIKH, SARAH..........................210, 497
SHEIKH, ZARA..............................1331, 1332
SHEIKH-MOHAMED, HALA......1101, 1102
SHEILS, CATHERINE.189, 301, 566,
643, 644, 734, 1681, 1770, 1896, 2050
SHEKATER-DICKSON, KIMBERLY........619
SHELTON, RAYMOND..................222, 437, 734
E. 服务提供者索引

SHEN, HONGGANG ......................... 616
SHEN, MICHAEL .............................. 370
SHENOY, ASHVIN ............................. 1440
SHENOY, CASEY ............................... 624, 631
SHERER, KIMBERLY .......................... 2093
SHEREV, DIMITRI ............................ 110, 120, 152, 158, 163, 281, 328, 528, 556, 573, 598, 629, 1617, 1649, 1831, 2005
SHERIDAN, SHANE ......................... 198, 432
SHERMAN HEIGHTS FAMILY HLTH CTRS INC .................. 919, 920, 952
SHERMAN HEIGHTS FAMILY HLTH CTRS INC .................. 74, 1352
SHERMAN, MARK ............................. 322
SHETABI, KAMBIZ ............................ 532, 1375
SHERMAN, MARK ............................. 322
SHERMAN, MARK ............................. 322
SHI, RONG .............................................. 78
SHI, RUIJING ................................. 1370
SHI, VERONICA ............................... 1967, 1968
SHIAU, NANCY ............................... 1441
SHIEH, MARIE ...................................... 624
SHIELDS, SEBASTIAN .......................... 121, 2261
SHIELL, RONALD .............................. 547, 548, 580, 584, 615
SHIH, LU-HSUN ............................... 210, 720
SHIH, LYNN ........................................... 332
SHILLITO, MATTHEW ....................... 693
SHIM, MICHAEL .................................. 562
SHIMIZU, KELSI MIDORI .................... 1604
SHIN, CHRISTOPHER .......................... 515
SHIN, HEAMIN ...................................... 569
SHIN, STEPHANIE ............................. 171, 175
SHINDO, YURI ..................................... 291, 624
SHIRAKI, JEAN ..................................... 1332
SHIRAZI, REZA ................................. 196, 670
SHIRKHANI, PARISA .......................... 240
SHIVELY, JEANNINE .......................... 657
SHOPAOUR, CAMELLIA ...................... 51
SHOJI, MARISSA .................................. 301, 644
SHOKOUHI, SARA .............................. 64
SHORES, CLORINDA ............................ 226
SHORT, ABIADE .................................. 125, 1052, 1563, 1564
SHORT, RICHARD .............................. 1176
SHOURESHI, POONE .......................... 243, 275, 276, 361, 407, 490
SHPANER, ALEXANDER ....................... 621
SHERBA, MOHAMMED ....................... 472
SHIVASASTAVA, VINEET ..................... 252, 369
SHU, I WEI ........................................... 2314
SHUCKETT, ARIEL ............................. 638, 1409, 1410, 2041
SHULEKIN, MITCHELL .......................... 2417
SHUM, MERRILL .................................... 215, 503
SHUMILAK, KAILI ......................... 1332, 1333
SHUNE, HONG ...................................... 38, 249
SIAVOSHI, SARA .............................. 635
SICKLES, JENNIFER ........................... 497
SICKLES, MAGGIE .............................. 111, 1017
SIDDIQUI, FARYAL ............................. 287
SIEGFRIED, TRACY ............................. 46
SIEN, STEFAN ........................................... 516
SIETSMA, ALEXANDRA ....................... 608
SILVA SEPULVEDA, JOSE 1664, 1684, 1860, 2075
SILVER, BRENT ..................................... 124, 712, 732
SILVERSTEIN, KAYLI .......................... 96, 595
SILVESTRI, NICOLE ............................ 285
SILVEY, CHRISTOPHER ....................... 2283, 2315
SIMMONS, PAMELA ........................... 86
SIMON, SCOTT ....................................... 326
SIMPSON, DANIEL .............................. 176, 316, 670
SIMPSON, ERIC ................................. 2203, 2320
SINCLAIR, JAMES .............................. 290, 710
SINGER, JACOB ..................................... 70
SINGH, DEEPJOT ............................... 363
SINGH, GAURAV ............................... 1968
SINGH, HARDEEP .............................. 246
SINGH, HIMANI ...................................... 563
SINGH, JOGENDRA ............................ 210
SINGH, KARAN ................................. 276, 407, 408, 490, 491, 592
SINGH, MAHAVIR .............................. 169
SINGH, PUJA ......................................... 1864, 2098
SINGH, RAMENDEEP .......................... 1171
SINGH, SAMARJIT ............................. 392
SINGH, SIMRANJIT ............................ 476
SINGHVI, AJEET ................................. 213
SIRICHOTIRATANA, MELISSA 199, 499, 560, 615, 709, 719
SIRLEAF, MASSANU ............................ 154
SIROTA, MICHAEL ............................... 693
SISE, MICHAEL .................................... 687, 688
SIU, CURTIS .......................................... 45
SIVA, ANDREW ................................. 741
SIVA, TENAYA ................................. 29, 71
SKAF, AYHAM 127, 128, 160, 336, 556, 1056, 1116, 1117, 1564, 1565
SKALSKY, ANDREW ......................... 1867, 2119
SKAY, RICHARD ................................. 2422
SKELETON, SEAN .............................. 339
SKINNER, ANTHONY .......................... 222, 437
SKINNER, NICOLE ............................. 1816, 2161
SKULSKY, EVA ................................. 568
SKVARNA, KAREN ............................. 383
SLATER, JERRY 319, 679, 1812, 2152, 2153
SLEIMAN, JOSEPH ............................ 1192
SLOAN, ERICA ................................. 153, 1644
SLOANE, CHRISTIAN ......................... 1975
SMILDE, REEVE ................................. 1371
SMITAMAN, EDWARD ......................... 319, 679
SMITH, ALLISON .............................. 657
SMITH, ANTHONY ............................. 226
SMITH, CASEY ................................. 288, 1736
SMITH, CHELSEY ............................. 1750, 2001
SMITH, COLLIN ................................. 134, 192, 577
SMITH, DIANNE ............................... 228
SMITH, DOUGLAS .............................. 717, 1575
SMITH, EMILY ................................. 1768
SMITH, GREGORY ............................... 89
SMITH, JENNIFER ............................. 608
SMITH, KELLI ................................. 1701, 1849
SMITH, MARK ................................. 566, 644
SMITH, PAIGE ................................. 724
SMITH, SHARON 1080, 1081, 1179, 1180
SMITH, SONYA ................................. 564, 758, 2291, 2329
SMITH, STEPHANIE .......................... 95
SMITH, WILLIAM .............................. 644, 734
SMOOT, CHARLES ............................. 1333
SNODGRASS, JULIE ......................... 286, 610
SNOOK, BRIAN ................................. 57, 1208
SNOWDEN, KELLY ............................ 310
SNYDER, AMANDA ............................. 657
SNYDER, CHRISTOPHER 29, 71, 82, 1334, 1539
SNYDER, KIRSTIN ........................... 608
SNYDER, LINCOLN ......................... 267
SNYDER, MICHELLE ......................... 1851
SOBHANIAN, SHAHAB 261, 389, 470, 590
E. 服務提供者索引

SOCHA, TRACI ........................................ 1506
SODHI, SANDEEP..................................... 549
SOHN, ROGER ........................................ 705, 706, 707
SOLAR, SARA ........................................... 262
SOLIC, DIANE ......................................... 96
SOLIS, KEVIN ........................................ 173, 2337, 2417, 2424
SOLOMON, AMANDA ................................. 285, 608
SOLORIO JR, ROBERTO .............................. 2315, 2320
SOLTERO, RICARDO .................................118, 122, 123, 716
SOMERSET SUBACUTE AND CARE. .............778, 2241
SONG, ALEXANDER ..................................293, 627
SONG, CAROL ........................................ 752, 2213
SONG, DELU.301, 566, 644, 1771, 1897, 2051
SONG, JOYCE ......................................... 1158
SONG, RICHARD ...................................... 651, 2020, 2116
SONG, SEUNG-YIL ..................................117
SONG, RICHARD ...................................... 651, 2020, 2116
SONG, RICHARD ...................................... 651, 2020, 2116
SONG, WEI .............................................650, 2069
SONOJ, NISHANT ..................................... 734
SOON, SEAVER .........................................616
SOONG, YEN-HUI .................................. 364, 392, 701, 705
SOPHY, ELIZABETH ................................ 619, 1334
SORILOPEZ, JOSE ..................................124, 712, 732, 1623, 2199
SORENSON, ROBERT ................................ 222, 511, 734
SORIA LOPEZ, JOSE 124, 712, 732, 1623, 2199
SORIA, CLAIRE ........................................ 1709, 1920
SORIA, JULIE ........................................... 201
SOSA, DAVID ......................................... 1083, 1084, 1296, 1297
SOTIS, JAMES ......................................... 54
SOTO, GILBERTO .................................... 286
SOUTHDAY URGENT CARE INC. ..............15, 2239
SOUTH COAST MEDICAL GROUP .............15, 2451
SOUTH BAY POST ACUTE CARE. ..........778, 2239
SOUTH BAY MEDICAL CENTER .............15, 2451
STAHN, KEVIN ......................................140, 1638, 1639
STANCH, STEPHANIE ............................... 608
STAINER, GREGORY ..................................128
STABLEY, MICHAELA .............................. 82, 715, 1540
STALLINGS, ANDREA ............................... 2128
STANDL, SARAH ...................................... 553
STANFORD COURT SKILLED NURSING AND REHAB CENTER 781, 2251
STANFORD, DAVID .................................. 84
STAVICKA, MELISSA ..................................197
STARK, ERIK .......................................... 561, 571
STAUNTON, MICHAELE. ............................ 53
STEADMAN, MICHAEL ............................... 170
STEER, DYLAN ........................................ 172, 295, 633
STEVENSON, REHEIA .............................1723, 1851
STEWARD, TYLER ....................................1744
STEFANIDIS, NICOLETTA ........................... 589
STEFFENSMEIER, CHRISTA ...................... 608
STEIN, ALEXANDER ............................... 112, 182, 616, 756
STEINBERG, LEONARD ............................ 2075
STEINBERGER, AMANDA .......................... 319
STENSMA, LARS .....................................1005, 1006
STEITFANSON, ROBERT ............................ 28
STEITFANSON, SAMUEL ......................... 322, 688
STERN, ANNA ......................................... 311, 660
STERN, MARK .......................................... 197, 765
STERNFELD, DANIEL ............................... 256, 373
STERN, DANIEL ........................................ 45
STEVENS, KENNETH ................................ 293
STEVENS, WHITNEY ..................................423
STEVENS, ROBERT ................................. 618
STIROSH, RACHEL .................................... 261, 262
STOVER, LAURIE ..................................... 2117
STRAHA, LISA ........................................ 618
STRAKA, CHRISTOPHER 139, 176, 670, 679, 2153
STRAUSS, JOANNA E ................................. 611
STRAZICICH, CARLA ............................... 30, 1158
STREET, KYLE ........................................ 2269, 2293
STRINGER, JESSE ................................... 2075
STRODTBECK, PAUL ................................. 45
STROUTF, PETER ....................................... 31
STUBBE, AMANDA ................................... 165
STUMP, CHARLI ....................................... 1442
SU, DANIEL ...........................................277, 409, 492, 592
SU, DERRICK .......................................... 362
SU, VENNES ........................................... 612, 1297
SUAZ, ROBERTO ..................................... 2315
SUEJAMANIAN, RAMA ............................. 1442
SUEJAMANIAN, RUPA ................................ 757
E. Service Provider Index

SUDHAKAR, DEEPTHI 110, 120, 152, 158, 181, 184, 598, 629, 708, 710, 1617, 1649, 1675, 2005, 2006, 2198
SUGGS, SARAH 233, 539, 1705, 1706, 1879
SUGIHARA, CORINNE 550
SUH, DAVID 521
SUHIR, ERIN 608
SU, KAVI 454
SUK, KEVIN 302
SULEIMAN QAFITI, KHAVALA 1443
SULLIVAN, ELISSA 1572
SULLIVAN, JESSICA 169, 290, 624, 710
SULLIVAN, LAUREN 294, 627
SULLIVAN, THOMAS ... 693, 1827, 2182
SUMMERS, STEPHEN 114
SUMMERS-DAY, COURTNEY 233, 619, 1335, 1703, 1984
SUN CITY CONVALESCENT CENTER 782
SUN, JASON 771
SUN, JOHN 259, 260, 384, 385
SUN, MICHAEL 693
SUN, PAUL 260, 384, 385
SUN, YEMING 38
SUNA SITTO, MOHEEN 717, 1576
SUNTAY, BERK 565, 760
SUOZZO, JOSEPH 195, 1694, 2270
SUPAT, BENJAMIN 288, 1736
SUPERNAW, AMY 657
SURI, RAJAT 516, 770, 1868, 2233
SUSAN PARHAM HOUSING CORPORATION 2253
SUTTLE, CAROLYN 630
SUTTNER, DENISE 652, 1676, 2021, 2117
SUTTON, BRIAN 1666
SUYAMA, JULIE 1766, 2041
SUYDAM, STEVEN 278, 594, 1709, 1920
SWADENER, NINA 53
SWARTZ, ERIN 1955
SWARTZ, JOHN 20, 1034, 1335
SWEAT, MARIE 2030
SWEENEY, NATHALY 1677, 2021
SWEENEY, ZSA ZSA 529, 608
SWEET, JASON 679, 2153
SWEET, PATRICK 116, 1540
SWEIGERT, JAMIE 2315
SWENSON, FRANK 324
WORDS, KELLY 2191
SY, JOAN 42
SY, RAMON 83, 1554, 2208
SY, THEODORE 361, 362
SYAL, GAURAV 290, 621
SYCHANGCO, PAUL 249
SYED, SAMEENA 60
SYED-UDDIN, SUMIYAH 1863
SYMANSKI, ELIZABETH 96, 165
SYN, GENE 395
SZABO, HAYLIE 150, 310
SZCZESIK, KRISTJAN 226
SZMIDT, MARIA 71, 78
SZPUNAR, MERCEDES 264
SUZ, ERIC 427
SZYMANSKI, JARED 40
TA, MINI 2422
TA, TRAN 2417
TABARANZA, PHOEBE 754
TABIL-GALAPON, BERNICE 217, 433
TABILA, BRIAN 531
TADDONIO, MICHAEL 1813, 2154
TADROS, ANTHONY 1813, 2155
TADROS, EMAD 664, 665
TADROS, JESSICA 224
TAECHARVONGPHAIROJ, VEERAVAT 35, 215, 216
TAGDIRI, KEVEN 28
TAGHIZADEH, BEHZAD 329, 330, 1835
TAGHVA, ALEXANDER 480
TAHAEI, SEYED 102, 130, 190, 577, 652
TAHERI, DANIEL 499
TAHERI, NIMA 249
TAHIRI, BAHAREH 1513, 1514
TAI, AUDREY 462
TAI, KUANGKAI 1247
TAING, JENNIFER 1955
TAJRAN, DEENA 159, 638
TAKESITA, KEN 277, 526
TAKHAR, JASMINE 701
TALANKI, VARUN 435, 505, 526, 527, 732, 750
TALAVERA, GREGORY 20, 82, 1034, 1035, 1541
TALBOT, ADRIANNE 1955
TALEBZADEH, NOJAN 142
TAM, EMILY 422, 567, 761, 762, 1848, 1898, 2229
TAM, MAY 2418
TAMAS, VANESSA 2094
TAMAYO, MAITHE 1443, 1444
TAMAYO, SYDNE 105, 177, 570, 764
TAMAYO-MURILLO, DORATHY 319, 679
TAMMELIN, BRUCE 474
TAN, CONNIE 173
TANAKA, HIDEAKI 1975
TANAKA, MARY 1011
TANAKA, SCOTT 693
TANAMAI, VAYA 256, 373
TANG, ANDREW 1863, 2094
TANG, ASHLEY 762
TANG, KIM 425
TANG, MICHAEL 292, 1745
TANG, TAYLOR 486
TANG-RITCHIE, LENG 163, 281, 600
TANKSLEY, SIMON 62
TANTISIRA, KELAN 2108
TANTOD, KULIN 1148, 1149
TANUS, DEBORAH 756
TARLE, STEPHANIE 315, 667, 1807, 2159, 2281, 2315
TARVER, LESLIE 313, 2282
TASTO, JAMES 693
TAUB, PAM 1753
TAUNTON, PHILIP 190, 302, 645
TAYAG, DYLAN 158
TAYANI, RAMIN 257, 380, 462
TAYLOR, CHRISTOPHER 1700, 1887, 1888, 2220
TAYLOR, DAVID 1750, 2002
TAYLOR, INGE 611
TAYLOR, ISHA 514
TAYLOR, KAYLA 1284
TAYLOR, MARIO 324, 693, 1827, 1828, 2182, 2183
TAYLOR, MISTY 158

2496
E. 服務提供者索引

TAYLOR, RYAN ......... 132, 340, 657
TAYLOR, TASHA ........... 716, 1572, 2209
TAYYAB, NEIL ............. 145, 343, 693
TCHAKMAKJIAN, LEVON ... 27, 1102
TEACHER, THEODORE ...... 455, 456
TEBEYANI, NEYSSAN.277, 409, 410, 492, 493, 592
TEE, ALEXANDRA ............ 1035
TEETER-WITT, ALYSSA .... 1694, 2270
TEGUH, COLLIN .......... 71
TEJADA BRAS, SANDY ...... 609
TEJEDA, FRANCISCO .................. 1544, 1545
TELLECHEA-SANCHEZ, SELMIRA
............................................. 781, 2250
TEMECULA HEALTHCARE CENTER
.............................................. 782
TENG, WANG ................. 397, 399, 403
TERADA, SEIJI .............. 383, 589, 590
TERRIER, NATALIE ............ 470
TERRY, AMANDA ............. 1135
TESFAI, HELEN ............. 1802, 2129
TESSIER, ADLA .............. 79
TEW, JOHN ...................... 2360
TEYMOORIAN, ARIAN .......... 501, 727
TEYMOORIAN, SAVAK ....... 380, 589
THACH, TERILYN .......... 2356
THAI, AMANDA ............. 2422
THAI, JUSTIN .............. 1336
THAKKAR, SANDEEP ......... 254
THANGARAJAH, HARIHARAN.1869, 2185
THAPER, MOHINDERPAL .... 575, 1912
THE BRADLEY COURT ......... 2241
THE COVE AT LA JOLLA ...... 779, 2244
THE DORTHY AND JOSEPH
GOLGBERG HEALTHCARE CENTER.
.............................................. 2242
THE PAVILION AT OCEAN POINT.
.............................................. 2250
THE SHORES POST ACUTE .... 781
THE SPRINGS AT PACIFIC REGENT.
.............................................. 781, 2250
THE VILLAGE HEALTHCARE CENTER.
.............................................. 779
THE VILLAS AT POWAY ....... 780, 2247
THEPVONGSA, MELISSA ...... 762
THIBAULT, WILLIAM .......... 486, 487
THIELE, JENS ................. 499, 560, 719
THIEMSEN, KAREN ........... 2316
THIRUNAGARI, HARRSHA ...... 1159
THODE, LAURA ............. 739
THOLKE, LOREN .......... 749
THOMAS, CARLTON ....... 116, 157, 621
THOMAS, CHERYL .......... 51, 52
THOMAS, KAITLIN ........... 140, 342
THOMAS, PAULA .................. 185, 729, 2270
THOMAS, ROBERT .......... 2002
THOMAS, ROGER ........... 568
THOMAS, SEAN .............. 16
THOMAS, STEPHEN ....... 724, 725, 765
THOMAS, THEODORE ........ 633, 2023
THOMAS, ZACHARY ........ 1336, 1337
THOMPSON, CHERYL ....... 1149
THOMPSON, CHRISTOPHER.260, 465
THOMPSON, COLE.319, 679, 680, 1813, 2155
THOMPSON, DANIELLE ....... 321, 684
THOMPSON, JOHN .......... 331
THOMPSON, RUSSELL ....... 583
THOMPSON, SANDRA ........ 106, 594
THOMSON, EMILY .......... 507
THOMSON, SAMANTHA ....... 298, 638, 1766, 1767, 2042
THUNDER, RICHARD ....... 151, 324
THYGERSEN, ALAYSA ....... 1703
TIAN, QING ................. 102, 512
TIANGCO, IRINEO .......... 59
TIEN, AUDRIS ............... 263
TILLEY, MONICA ........... 609
TILLMAN, SYLVIA ........... 2382, 2418
TILTON, PETER ............ 2316
TIMBERMAN, SARAH ....... 1955
TIMBOE, JENNA ........... 345
TING, JAMES ............ 271
TINT, DERRICK ............ 736
TONG, ELAIN ................. 36
TONG, GARRICK ............. 2321
TONJES, ERIKA .............. 1956
TONNU, ANH.190, 337, 645, 646, 2343, 2367, 2382, 2419
TOOMA, GHASSAN ............ 524
TOPIK, AMANDA ............. 609
TOPILOW, NICOLE ............. 302, 1771
TOPPEN, LAURA ............ 1723, 1956
TOPPEN, WILLIAM ........... 293, 627
TORCHINSKY, CYRUS ......... 649
TORIOLA, ABIODUN .......... 162, 447
TOROSIAN, KARO .......... 293, 295
TORRES, HECTOR ............. 2204, 2321
TORRES, JOANN ............. 1578, 2210
TORRES, RANDALL ........... 95
TORRES, REBECCA .......... 46, 47
TORREY PINES SENIOR LIVING .... 781
TOTH, JESSICA ............... 1180
TOUBIA, ELIAS .............. 2337, 2393, 2425
TOUMA, ELIE ................. 134, 192, 659
TOVAR PADUA, LEIDY ...... 1995
TOVAR, JUAN ................. 114
TOWERY, BOBBY ........... 389
TOWNE, BROOKE ........... 555, 556
TOWNS, ARTA ............... 609
TOWSEND, LAURIE ........... 1337
TRADONSKY, STEVEN ........ 693

2497
E. Service Provider Index

TRAINER, JASON .............166, 572, 709
TRAN, ALEXANDER ............2357, 2419
TRAN, AMY .......................170
TRAN, BRYAN ....................459
TRAN, CECILIA ..................45
TRAN, DAO .......................88, 756
TRAN, DAPHNE .................181, 573, 609
TRAN, HENRY ....................2382
TRAN, JESSICA .................1627, 1899, 2229, 2230
TRAN, KELLY ...................1285
TRAN, LILIAN ....................64
TRAN, MICHAEL .................521, 2423
TRAN, NEIL ......................360, 449
TRAN, PHI .......................293
TRAN, RICHARD ................285
TRAN, SHERI .....................170, 171, 175
TRAN, STEPHANIE ..............258, 423
TRAN, STEVE ....................455
TRAN, THAO .....................2426
TRAN, THERESA ...............507, 1864, 2094
TRAN, TIFFANY ................459
TRAN, TONNIA ..................1337
TRAN, TUAN ......................746
TRANG, CHAU ..................2420
TRANSFIGURATION SHIN,
CHRISTIANNE .................515
TRAUT, JOEL .....................2095
TREJO, RAUL ....................21, 1036, 1541
TRESENRITER, MEGAN ..........114
TRI CITY MEDICAL CTR .......11, 2237
TRIIMLET, COLLEEN ...........657
TRIMM, CASSIDY ...............1817
TRING, ELEANOR ..............171
TRINGALE, KATHRYN ..........316
TRINH, MIMI .....................80
TRIVEDI, JANKI .................441, 742
TRIVEDI, MEHUL ..........293, 627
TRIVEDI, NAYANA MOHAN ....293
TRIVEDI, RADHIKA ............548, 549
TRIVEDI, SURAJ ...............1709, 1921
TROYER, CORY ................320
TROYER, EMILY ...............136, 2261, 2317
TRUCCARE, 785, 786, 826, 827, 828, 862, 863, 864, 866, 868, 869, 873, 957, 958, 959, 960, 961, 962, 963
TRUECARE, 16, 28, 61, 63, 80, 1007, 1008, 1132, 1232, 1248, 1249, 1492, 1493, 1494
TRUECARE, DALE .............285, 1723
TRUECARE, JENNIFER 638, 1052, 1053, 1411, 1412, 2042
TRUECARE, MIGUEL ..........717, 1576
TRUECARE, ANDREW ..........53
TRUECARE, MICHAEL ..........449
TRUECARE, NHA ...............1338
TSAI, CHIAHONG ..............423, 771
TSAI, CINDY ....................682
TSAI, GRACE .................134, 340, 341, 538
TSAI, JAMES ....................215
TSAI, MATTHEW ..........1742, 1988
TSAI, MON TA .................54
TSANG, JOYCE .................279, 595
TSANG, WALTER ..........215, 503
TSE, YARDY .................560, 616, 719
TSI, SY .........................527
TSIMPAS, ASTERIOS ..........481
TSUCHIYA, KIMIKO .........1338
TSUDA, PAIGE ...............1710, 1921
TSUI, NANCY ..................2383
TU, BEVERLY ..................2383
TU, CHARLES .................2420
TUASON, NORBERTO .........635, 665
TUEROS, VICTORIA .........1285, 1286
TULLY, JEFFREY ..........278, 594, 1710, 1921
TUN, TIN ......................215
TUNG, SHAWNEE .............397
TUNG, VIVIAN .................1170
TURK, PAUL ....................201
TURIY, YULIYA .................366
TURNER, ELIZABETH ..........1956
TURNER, SHEREENA ..........1124, 1461
TYAGI, ABHILASHA ..........156, 531, 574
TYE, KAREN .................176, 316, 670
TYNER, JOHN .................324, 325
TZENG, ERIC ..............278, 594, 1710, 1921
UCSD LA JOLLA JOHN SALLY
THORNTON ..................12, 2238
UCSD MEDICAL CTR ............12, 2238
UDANI, VIKRAM ................688
UDDIN, MOHAMMAD 199, 200, 505, 506
UDOHO, EKAETE ...............537, 1461
UDOWENKO, MARINA ..........619
UEBELHOER, NATHAN .........156, 531, 574
UHL, BARRY ....................139
ULANER, GARY .................265
ULIBARRI, MATTHEW ....224, 438, 736
ULRICH, STACEY ...........2095
UMANSKY, JEFFREY ..........324
UNDERWOOD, JOLLY, AMY ....65
UNGAR, ARLENE ..........149
UNGAR, LINDSEY ............1818, 2166
UNIVERSITY CARE CENTER, 781, 2250
UNSDORFER, KYLE 320, 680, 1813, 2155, 2156
UNTERBERG, STEPHEN 698, 699, 2191, 2192
UPASANI, VIDYADHAR 1869, 1908, 2183
UPPAL, GURVINDER ..........749
URBAND, LINDSEY ..........694
URBANIC, JAMES ..........570
URIAS, DANIEL .............750
URIBE-BRICE, LILIANA .......1371
USMANI, AMENA ..........650
UTZ, JACK .................1541, 1542
UWEDJOJEVERE, LETICIA ....23, 1042
UY, ASHLEY .................1084
UY, CARMELITA ..........1218

V

VADAPARAPNIL, JANET ..........422
VAHABZADEH-HAGHI, ANDREW 306, 649, 650, 1785, 2064, 2065
VAHDAT, VALERIE ...........708, 2195
VAHDOT, NOUSHIN 320, 680, 1814, 2156
VAIDYA, KAMALA 1630, 1688, 1904, 2095
VAIDYA, NADEEM ..........257, 258
VAKILIAN, SIAVOSH 196, 670, 671, 680, 1696, 2156
VALADEZ, JESUS ............32
VALDEVERONA, KATHY .......210

2498
E. 服务提供者索引

VALDEZ, KELLY..........................681
VALDEZ, KRISTAL.531, 1371, 1372,
1978, 1979
VALDEZ-HERNANDEZ, ISRAEL.217,
218, 729, 730
VALENCE, JESUS.............................657
VALENZUELA, TRICIA............1338, 1339
VALENTA, CAYLIE...........................514
VALLE VISTA POST ACUTE...779, 2243
VAN DEN HEUVEL, KELLY. .............638
VAN DER REIS, WILLIAM....................591
VAN HOOSE, MARC...........................2420
VAN HOLLEBEKE, RACHEL.94, 1004,
1542
VAN, HO HAI. .......................355, 366, 585
VANFOSSEN, BRIAN. ....667, 2139, 2317
VAUGHN, GABRIELLE......................2075
VAVINSKAYA, VERA......................1844
VAYNGORTIN, TATYANA...........2097

VALENCIA, MARILES...............1065, 1218
VALDEZ, KELLY.......................................681
VALENCIA, JESUS..................................657
218, 729, 730
VALDEZ-HERNANDEZ, ISRAEL.217,
1978, 1979
VALDEZ, KRYSTAL.531, 1371, 1372,
VALENZUELA, TRICIA............1338, 1339
VALENTA, CAYLIE...........................514
VALLE VISTA POST ACUTE...779, 2243
VAN DEN HEUVEL, KELLY. .............638
VAN DER REIS, WILLIAM....................591
VAN HOOSE, MARC...........................2420
VAN HOLLEBEKE, RACHEL.94, 1004,
1542
VAN, HO HAI. .......................355, 366, 585
VANFOSSEN, BRIAN. ....667, 2139, 2317
VAUGHN, GABRIELLE......................2075
VAVINSKAYA, VERA......................1844
VAYNGORTIN, TATYANA...........2097
E. 服务提供者索引

VISTA HEALTHCARE CENTER. 782, 2253
VISTA HOUSE. 2253
VISTA KNOll SPECIALIZED CARE FACILITY. 782, 2254
VIVIRITO, MARY. 2333, 2349, 2357, 2368, 2383, 2384, 2394, 2420
VIZCARRA, DAVID. 741, 742
VO, ANDREW. 1772, 2053
VO, ANDREW MINH. 2368, 2421
VO, PHU LUONG. 71, 1984
VO, QUANG. 524
VOLLER, STEPHANIE. 2021, 2022
VOLPP, HEATHER. 751
VOLPP, PAUL. 139, 196, 341, 671, 1634, 1695, 1845, 2143
VORA, RONAK. 456
VOURLITIS, MELISSA. 16, 21, 25, 29, 71, 2500
VU, BAO-KHOI. 348, 363, 369
VU, LAC. 638
VU, PETER. 1744, 1992
VU, STEVE. 745, 750
VU, WENDY. 1167

W

WACHHOLZ, PAMELA. 211
WACHNER, KRISTELYN. 198, 723
WADELL, CHAD. 54
WADHWA, MANISH. 596
WAGNER, EDWARD. 411
WAGNER, PAUL. 79
WAGNER, TASHA. 558, 754
WAHLIN, TAMARA. 310, 657, 1802, 1803, 2129
WAINESS, REID. 536
WAINEWRIGHT, MITCHELL. 40, 345
WAKILY, HUSSNA. 571
WALDRUP, L’ARHONDA. 1671, 1957
WALKER, BRADLEY. 756, 763
WALKER, JULIE. 2162
WALLA, MEGAN. 165
WALLACE, PATRICIA. 427, 451
WALLACE, STEPHANIE. 568, 762, 2230
WALLACE, WILLIAM. 397, 398, 399
WALLACH, SABINA. 291
WALSH, ERIN. 684
WALSH, HEATHER. 657
WALSH, JOHN. 1692
WALTER, ROME. 54
WALTERS, DANIEL. 366, 367
WANG, ALICE. 590
WANG, AMY. 503
WANG, ANCHI. 101, 187, 297, 576
WANG, ANGELA. 1751, 2002, 2003
WANG, CHUNYANG. 101, 187, 297, 576
WANG, DEHUA. 2069
WANG, EMILY. 1688, 1842, 1905, 2097, 2098
WANG, JAMES. 580, 581
WANG, LILLIAN. 389
WANG, LUKE. 326, 699, 1831, 2192
WANG, MATTHEW. 149, 258
WANG, MICHELLE. 278, 1710
WANG, NAM. 745
WANG, REGINA. 1339
WANG, SHIN-CHERN. 521
WANG, STEVEN. 241, 258
WANG, WEI. 38
WANG, WENG-LIH. 766, 768, 769
WANG, WILLIAM. 271, 325, 485
WANG, XIUJIE. 230, 231, 745, 746, 775, 776, 777
WANG, YE. 381, 589
WANG, YVETTE. 2097
WARD, KATHERINE. 1171, 1176
WARD, MICHAEL. 285
WARD, NICHOLAS. 726
WARMER, MARK. 644
WARNER, MICHAEL. 222, 734
WARNER, NIKHIL. 236, 237
WASHBURN, NEAL. 469
WASSON, MINA. 1444
WASTILA, LISA. 1372, 1373
WATANABE, BRIAN. 398
WATERS, ELIZABETH. 1444
WATSON, DEBORAH. 306, 650, 1785, 1786, 2065
WATTANAMANO, PORNTHEP. 1373
WATTS, ELI. 79, 1374
WAYNE, DIANE. 517
WAYNE, EDGAR. 452
WEATHERLY, JACOB. 1445
WEAVER, AMANDA. 2263
WEAVER, APRIL. 762, 1601
WEAVER, MARINEL. 630
WEBB, SHANNON. 577, 657, 2129
WEBSTER, LUKE. 2003
WEDDELE, DIRK. 241
WEICKERT, MARIA. 1288
WEIDNER, ANNE. 285
WEINER, KEITH. 466
WEINERT, CARL. 467, 485
WEINSTEIN, GEOFFREY. 139, 196, 341, 671, 1634, 1696, 1845, 2143
WEIR, JACQUELINE. 310, 657, 658, 1803, 2130
WEISS, KATHERINE. 652, 1853, 2022, 2118
WEISSBROD, PHILIP. 307, 650, 1786, 1787, 2065, 2066
WEISSMAN, CORY. 665, 2317
WELLS, JOSEPH. 515
WELLS, MARY. 427
WELLS, PHILLIP. 590
WELLS, TODD. 579, 1916
WELSH, BRITT. 158
WEN, AKI YEN CHANG. 1043, 1555
WENDLE, TREVOR. 112
WEON, SUK KYENG. 423
WERHO, DAVID. 2076
WERNER, KRISTINE. 739
WERNER, R AARON. 2344
WERNER, REX. 2343
WERTMAN, BRETT. 238, 250, 344, 345
WEST, JULIE. 1853, 1913, 2022
WESTEREN, ALAN. 302
WESTERMANN, MELISSA. 1618, 1893, 2011, 2012
WESTERN ADHC. 2256
WETERSTEN, NICHOLAS. 1753, 1852
WHEATLEY, BENJAMIN. 324, 694
WHEELER, KIM. 1651, 2264
WHITE, ALAN. 363
WHITE, DANIEL. 143
WHITE, EVAN. 139, 178, 671
E. 服務提供者索引

WHITE, JON ........................................... 271, 272
WHITE, KATHERINE.......................... 1339, 1340
WHITE, KERI ..................................... 574, 1911
WHITE, KYLIE ..................................... 132, 340, 1844
WHITE, XUANHA .................................. 728
WHITEHURST, UNIQUE .................... 1957
WHITE, XUANHA .................................. 728
WHITLEY, NICHOLAS ......................... 21, 114, 1037
WIGAND, SARAH ................................ 297, 635
WIKSPORT, MATTHEW ....................... 609
WILLIAM, PHEBEE............................. 211
WILLING, STEPHANIE ....................... 742, 771
WILLINGER, STEPHANIE .................... 191, 1692
WILLEY, MARTI .................................. 265, 285, 497, 609, 709
WILLIAMS, ALICIA ............................. 279, 595
WILLIAMS, ALISA ............................... 622, 638
WILLIAMS, ALISON .............................. 598
WILLIAMS, BRANDON ....................... 291
WILLIAMS, BREATHNA ..................... 154, 529, 609, 1082, 1198, 1199, 1288, 1289
WILLIAMS, HOWARD ........................... 79
WILLIAMS, JEFFREY ......................... 1475
WILLIAMS, JINA .................................. 754, 1596
WILLIAMS, MARK .............................. 381, 702, 703
WILLIAMS, MATTHEW .................... 1860, 2076
WILLIAMS, SHANTRECE ...................... 154, 573, 1645
WILLIAMS, STACY .............................. 1817, 2162
WINDHAM, SUZONNE .................... 558, 755, 1888, 2220, 2221
WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL .... 781, 2250
WINDSOR GARDENS CONV & TREATMENT CENTER .... 780, 2246
WINTER, MARY ..................................... 715
WOLF, RICHARD ............................... 1910
WONG, ANDREW ............................... 233
WONG, KRISTLE ............................... 583
WONG, MAYBELLE ............................ 610
WONG, POLLYANNA ......................... 262
WONG, RICHARD ............................... 2279
WONG, STEVEN ................................. 668
WONG, VICTOR .................................... 2103
WOO, ANDY ........................................ 610, 1957
WOO, LINDA ....................................... 307
WOO, RYAN ........................................ 610
WOO, KONG ...................................... 246
WOO, MICHAEL ................................... 249
WOO, ANDY ....................................... 610, 1957
XU, DIXON ...................................... 134, 135, 341, 538
YACOOB, MARLENE ......................... 36, 37, 42
YADLAPATI, RENITA ......................... 1751
YAGUDAYEVA, RAISA ....................... 665, 2318
YALDO, ATISHA .................................. 112, 154
YALVA, ETHAN ................................. 238, 250
YAMADA, KENTARO ......................... 644, 2051
YAMANAKA, MARIA ......................... 570
YAN, CAROL ................................. 307, 650, 1787, 1788, 2066, 2067
YAN, ERIC ........................................ 219, 435, 730, 731
YANG, ANDREW ................................. 263
YANG, BENJAMIN .............................. 291, 624
YANG, CHARLES ............................... 507, 508
YANG, DAVID .................................... 263
YANG, JENNIFER ............................... 2031
YANG, JENNIFER ............................... 2031
YANG, YIFAN ..................................... 142, 143
YAIAI, ELIZABETH ............................ 92
YAO, CATHERINE ............................. 1065
YAO, CATHERINE ............................. 1065
YAO, GRACE ...................................... 256
YAP, KONG PENG .............................. 246
YAP, MICHAEL ................................... 249
YAP, YING ......................................... 2501
E. 服务提供者索引

YAPHOCKUN, KAREN .................. 2098
YARTSEVA, YULIYA .......................... 610
YASHAR, CATHRYN ..................... 176
YASSIN, HAZEM ...................... 291, 624
YAU, STEPHEN ................. 110, 114, 152, 153, 156
YAZDANSHENAS, MARYAM .............. 52
YAZDI, JANET ......................... 54
YCASAS, EMILY ..................... 755, 2221
YEAM, INCHEL ......................... 705
YEANG, CALVIN ......................... 1924
YELLEN, LAURENCE ........... 330, 1835
YEO, ALEXANDRIA 165, 285, 610, 1654,
1724, 1958
YETTER, MARCUS .................. 348, 390
YIAN, CHRISTOPHER .................. 260, 386
YIDI, DIANA ......................... 2318
YIM, EUGENE ............................... 555
YODER, ANDREA ................... 1711, 1922
YOO, HEATHER ......................... 163
YOON, RYAN ............................... 1037
YORK, JOHN ............................... 139, 316, 671, 680
YORK, VINCENT ...................... 320, 680, 1814, 2157
YOSHII, DENIS ......................... 201
YOSHII-CONTRERAS, JUNE .. 101, 1603
YOU, ALAN ...................... 1737, 1975
YOU, TIMOTHY ......................... 381
YOUDERIAN, ARI ....................... 272, 419
YOUNAN, LAWRENCE ........ 1711, 1922
YOUNG, ALLA ..................... 2338, 2384
YOUNG, CAROLYN .................... 475
YOUNG, JENNIFER .................. 755, 1007
YOUNG, JOCelyn ..................... 1664, 2100
YOUNG-PEN, TONI .................. 1461, 1462
YOUNGBLOOD, SCOT ............... 145, 694
YOUNOSZAI, ADEL ..................... 2076
YOUSEF, ANDREW ..................... 1419
YOUSEF, AMR ......................... 219, 435
YOUSEF, FADY ....................... 290, 621, 1742, 1988
YU, AUDRINE ......................... 1818
YU, CAROL 302, 646, 1773, 2053, 2368,
2369, 2421
YU, CHRISTINE ...................... 64
YU, ELAINE ............................. 288, 617, 1737, 1975
YU, FANG .............................. 246
YU, HELENA ............................. 2103
YU, JENNIFER ......................... 2103
YU, JERRY ............................. 420, 728, 766, 769
YU, JERRY ............................. 420, 728, 766, 769
YU, MIAO ............................... 373
YU, PETER ............................... 477
YU, VICTOR ......................... 202, 246
YUAN, HENRY ......................... 123, 1622
YUEN, SELENE ......................... 71, 72
YUH, BENJAMIN ...................... 179, 327, 700
YUN, EDWARD ......................... 527
YUN, JONATHAN ...................... 33, 54, 55
YUNG, AARON ......................... 556
YUNG, DORIS ......................... 63, 579, 1249
YUNG, EDWARD ....................... 734
ZABANEH, ALEXANDER 128, 173, 336,
536, 644
ZABHI, RAMIN ......................... 451
ZABLIT, KARIM ....................... 1418
ZACHARIAH, MARCUS ............... 343, 688
ZAGE, PETER ......................... 2103
ZAHED, SHAHAB ....................... 249
ZAHEDI, MARCO ....................... 37
ZAHER, AARON ....................... 652, 1446
ZAHMER, MARVIN ..................... 1340, 1341
ZAIidi, NOORINA ...................... 2357
ZAKI, MICHELLE ....................... 24
ZAKKO, MARAM ....................... 574
ZAKOV, KAMEN ....................... 573, 1910
ZALESKI LARSEN, LISA .............. 112, 616
ZAMAN, RUMINA ....................... 466
ZAMANI, MAZIAR ....................... 45
ZAMBRANA, GEORGE .................. 1125
ZAMORA-FLYR, MARIA .............. 559, 755
ZAMPello, LISA ....................... 1164
ZANDER, ASHLEY ..................... 325, 1830
ZANDKARIMI, FARIBA .............. 1160, 1447
ZANGEN, ROCHELLE .................. 1250
ZAPPONE, ALIDA ...................... 564, 759
ZARE, SOMAYE ....................... 1791, 1792
ZAREMBa, Mark ....................... 45, 355, 356
ZARGAR, SHABNAM .................. 1065
ZARGARBASHI, STEFANIE ............. 367
ZAVARO, SUHAIL ...................... 110, 153, 598
ZAZERI, MAULIK ....................... 760
ZAYAS, MARIO ....................... 630, 2318
ZAYAT, DINA ......................... 474
ZAYED, AHMAD ....................... 27, 1102
ZEBEJAD, OMD ......................... 86
ZEBRACK, DAVID ....................... 86
ZECHE, RICHARD ..................... 436, 508
ZECHE, RONALD ...................... 154, 182, 430, 1140
ZELEDON, JAIME ..................... 211, 725
ZETTNER, ERIKA ....................... 279
ZHAN, FRANK ......................... 447
ZHANG, HAIYAN ....................... 1792
ZHANG, JOANNE ....................... 272
ZHANG, MICHELLE ................. 171, 175, 763
ZHANG, SHERRY ...................... 1751, 2004
ZHAO, HAIYAN ......................... 278
ZHAO, TAILUN 160, 173, 189, 302, 644,
2344, 2349, 2358, 2369, 2421
ZHENG, VINCENT ..................... 80
ZHONG, YAN ......................... 295, 634, 2023
ZHOU, JENNY ......................... 1992
ZHOU, SIWEI ...................... 200, 437, 735
ZIEG, ALAN 1054, 1113, 1114, 1191,
1415, 1416, 1417, 1590
ZIEERING, ROBERT .................. 751
ZIMBRIC, MICHAEL ................... 1678, 2031
ZIMMERMANN, DAVID ................ 756
ZIMMERMANN, JENNIFER ............ 2318, 2319
ZIMMERMANN, ANDRES ............... 62
ZINK BRODY, GORDON ............... 680
ZINK, IRENE .............................. 72, 1341
ZLATAR, ZVINKA ..................... 1807, 2282
ZORN, GEORGE ....................... 687
ZU, KAI ................................. 328, 329, 1834
ZUBAIR, RAHEEL ....................... 97, 616
ZUCKERMAN, KENNETH ............... 261
ZUNIGA, Vania ......................... 286
ZUREK, BDEANIA ....................... 2273
ZURITA, DANIELA ...................... 49, 86, 433
ZVANUT, DONALD 160, 337, 2344,
2349, 2358, 2369, 2384, 2395
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Navajo

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Punjabi

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Khmer

យើងមានសេវាកម្មប្រឈមព័ត៌មានលើព័ត៌មានសូម្រាប់អ្នកដែលមិនបានទទួលបានសេវាកម្មសេវាកម្ម។ អ្នកមានការសំរែសរាងនេះមិនគិតៃថាត្រូវបានគោរពបាន។ មានជម្រើសប្រឈមព័ត៌មានសូម្រាប់អ្នកដែលមិនបានទទួលបានសេវាកម្ម។ សូម្រាប់ការសំរែសរាងនេះមិនគិតៃថាត្រូវបានគោរពបាន。

Mien


Lao

ພິດທິພາບຂອງພວກເຮົາໄດ້ຮັບການຊອບພາບໂດຍບໍ່ເສຍຄ່າ ໜ້າ ທ່ານ ເພື່ອໃຫ້ໄດ້ຮັບພາສາ ທ່ານ ວັນ ແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ. ໃນຊ່ວຍໃນການຊອບພາບ ດ້ວຍວັນ ທ່ານ ວັນ ແມ່ນບໍລິການໂດຍບໍ່ເສຍຄ່າ.

Armenian

Այս ծառայությունն է բացի ներկայացված պաշտոնական տեքստերից, բնակչության համար։ Այս ծառայությունը գործում է բացի ներկայացված պաշտոնական տեքստերից, բնակչության համար։ Այս ծառայությունը գործում է բացի ներկայացված պաշտոնական տեքստերից, բնակչության համար։ Այս ծառայությունը գործում է բացի ներկայացված պաշտոնական տեքստերից, բնակչության համար։ Այս ծառայությունը գործում է բացի ներկայացված պաշտոնական տեքստերից, բնակչության համար։ Այս ծառայությունը գործում է բացի ներկայացված պաշտոնական տեքստերից, բնակչության համար։ Այս ծառայությունը գորշում է բացի ներկայացված պաշտոնական տեքստերից, բնակչության համար։ Այս ծառայությունը գորշում է բացի ներկայացված պաշտոնական տեքստերից, բնակչության համար։ Այս ծառայությունը գորշում է բացի ներկայացված պաշտո

Farsi

ما خدمات مترجم شفاهی رایگان آراه می‌دهیم تا به هر گونه سوالی که در مورد طرح سلامت یا دارویی ماری، پاسخ نده‌ایم. برای داشتن مترجم شفاهی، کافیست با ما به شماره 4413-452-4413-1 تماس بگیرید. کسی که فارسی صحبت می‌کند می‌تواند به شما کمک کند. این یک خدمات رایگان است.

Thai

ภาษาไทย เราให้บริการเพิ่มเติมเพื่อตอบคำถามของคุณเกี่ยวกับสุขภาพหรือแผนด้านยาของคุณ หากต้องการ บริการเพิ่มเติม โปรดโทรสายวันที่ 1-800-452-4413 มีคนที่สามารถพูดภาษาไทยได้เพื่อช่วยเหลือคุณ บริการนี้เป็น บริการฟรี
Multi-Language Insert
Multi-Language Interpreter Services

English We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-800-776-4466. Someone who speaks English can help you. This is a free service.

Spanish Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-776-4466. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-776-4466。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-776-4466。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。


French Nous proposons des services d’interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d’assurance-médicaments. Pour accéder au service d’interprétation, il vous suffit de nous appeler au 1-800-776-4466. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-776-4466 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.


Korean 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-776-4466 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-776-4466. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic إذا تقدم خدمات المترجم الفوري المجانية للإجابة عن أي استفسار يتعلق بالصحة أو جدول الأدوية لدينا. للحصول

Hindi हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएं उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-800-776-4466 पर फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

Italian E disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-800-776-4466. Un nostro incaricato che parla Italianovi fornirà l’assistenza necessaria. È un servizio gratuito.

Portuguese Disponemos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contate-nos através do número 1-800-776-4466. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.
French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-776-4466. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-776-4466. Ta usługa jest bezpłatna.

Japanese: 当社の健康健康保険と薬品処方薬プランに関するご質問にお答えするため、無料の通訳サービスがありますございます。通訳をご用命になるには、1-800-776-4466 にお電話ください。日本語を話す人 誰が支援いたします。これは無料の サービスです。


Ukrainian: Ми надаємо безкоштовні послуги перекладача, щоб відповісти на будь-які запитання щодо нашого плану лікування чи надання лікарських засобів. Щоб скористатися послугами перекладача, просто затеграфійте нам за номером 1-800-776-4466. Вам може допомогти хто, хто розмовляє українською. Це безкоштовна послуга.

Navajo: D77 at's77s baa 1hly3 47 doodago azee' bee aa 1hly3 b7na'7d[kidogo 47 n1 ata' hodoolnih7 h0l=. Ata' halne'4 biniy4go, koij8' 1-800-776-4466 b44sh bee hod77iinh. Dinê k'ehj7 yj[t'i' n7k1 adoolwoj. D77 t'il j77eh be an'ilwo.

Punjabi: ਫਨੰ ਮਜਦੀ ਮੀਚਨ ਨੇ ਦੁਰਖ ਪਾਲੂ ਫਨੰ ਦੁਰਖ ਬਿਜ਼ੇ ਬੀ ਸ੍ਰਕਾਰ ਦਾ ਸ੍ਰਕਾਰ ਕੇਂਦਰ ਦੁਰਖ ਪਾਲੂ ਫਨੰ ਦੁਰਖ ਬਿਜ਼ੇ ਬੀ ਸ੍ਰਕਾਰ ਦਾ ਸ੍ਰਕਾਰ ਵੀ ਸਰੀ ਸਰੀ ਦੁਰਖ ਪਾਲੂ ਫਨੰ ਦੁਰਖ ਬਿਜ਼ੇ ਬੀ.

Khmer: រឹងការសំណាក់ប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រការពោលផ្ទាល់ខ្លួនប្រក�
ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-452-4413 (TTY: 711), 8:00 a.m. to 8:00 p.m., seven days a week. The call is free.

中文 Chinese 请留意：如果您说中文，可以免费获得语言协助服务。请拨打 1-800-452-4413 (听障和语障专线：711)，每周七天办公，早上 8:00 至晚上 8:00。此电话为免付费专线。

한국어 Korean 주: 귀하가 한국어를 사용하시는 경우, 무료로 언어 지원 서비스를 이용하실 수 있습니다. 1-800-452-4413 (TTY: 711)번으로 주 7 일, 오전 8 시부터 오후 8 시까지 전화하실 수 있습니다. 이 전화는 무료입니다.

Русский Russian ОБРАТИТЕ ВНИМАНИЕ! Если Вы говорите по-русски, мы можем предложить Вам бесплатные услуги языковой поддержки. Звоните по телефону 1-800-452-4413 (TTY: 711) с 8:00 до 20:00 без выходных. Звонок бесплатный.

فارسی Farsi توجه: آگه به زبان فارسی صحبت می کنید، خدمات امداد زبانی بدون اخذ هزینه در اختیار شما می باشد. با شماره 1-800-452-4413 (TTY: 711) از ساعت 8:00 صبح تا 8:00 شب در هفته روز هفته تماس بگیرید. این تماس رایگان است.

भाषा Hindi ध्यान: यदि आप भाषा बोलते हैं, तो आपके लिए भाषा सहायता सेवाएं मिलेंगी निश्चित उपलब्ध हैं। फोन करना 1-800-452-4413 (TTY: 711), सुबह 8:00 बजे से शाम 8:00 बजे तक, सप्ताह के सात दिन। फोन करना फ्री है।

Lus Hmoob Hmong LUS CEEV: Yog koj hais Lus Hmoob, muaj kev pab txhais lus pub dawb rau koj.Hu rau 1-800-452-4413 (TTY: 711), 8:00 teev sawv ntsox txog 8:00 teev tsaus ntuj, xya hnuv hauv ib lub as thiv.Qhov hu xov tooj no yog hu dawb xwb.

Español Spanish ATENCIÓN: Si usted habla español, hay a su disposición servicios de asistencia de idiomas sin costo. Llame al 1-800-452-4413 (TTY: 711), de 8:00 a.m. a 8:00 p.m., los siete días de la semana. La llamada es gratuita.


Tagalog PAUNAWA: Kung nagsasalita kayo ng Tagalog, may mga available na libreng serbisyo ng tulong sa wika para sa inyo. Tumawag sa 1-800-452-4413 (TTY: 711), 8:00 a.m. hanggang 8:00 p.m., pitong araw sa isang linggo. Libre ang tawag.
Arabic

تنبيه: إذا كنت تتحدث اللغة العربية، يتوفر لك خدمات المساعدة اللغوية المجانية. اتصل على الرقم 4413-452-800-1.

Laotian

sortByLang: la

Japanese 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。

Punjabi

Japanese 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。

Khmer ピーディー 1-800-452-4413 (TTY: 711) 8:00 です。 20:00 です。 8:00 ピーク 8:00 ピーク、うらで で メウ ピル うらで で メウ フリ。 プラ ダリー です。

Urdu

Japanese 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。

Ukrainian ЗВЕРНИТЬ УВАГУ! Якщо Ви розмовляєте українською, ми можемо запропонувати Вам безкоштовні послуги мовної підтримки. Телефонуйте 1-800-452-4413 (TTY: 711) з 8:00 до 20:00 без вихідних. Дзвінок безкоштовний.

Mienh Mien TOV JANGX LONGX OC: Beiv taix meih gorngv Mienh waac nor, ninh mbuo gorn zangc duqv mbenc nzoih wang-henh niei weih faan waac bun meih muangx maiv zuqc feix liuc cuotv zinh nyaanh. Douc waac lorc taux 1-800-452-4413 (TTY: 711), 8:00 diemv ziangh hoc lungh ndorm mingh taux 8:00 ziangh hoc lungh muonz, yietc norm liv baaiz se koi nzoih siec hnoi. Naaiv norm douc waac gorn se wang-henh longc maiv zuqc feix liuc cuotv zinh nyaanh.
Notes
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